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I

Annual Session Program

Pasadena, California, May 9-12, 1938

Sixty-Seventh Annual Meeting

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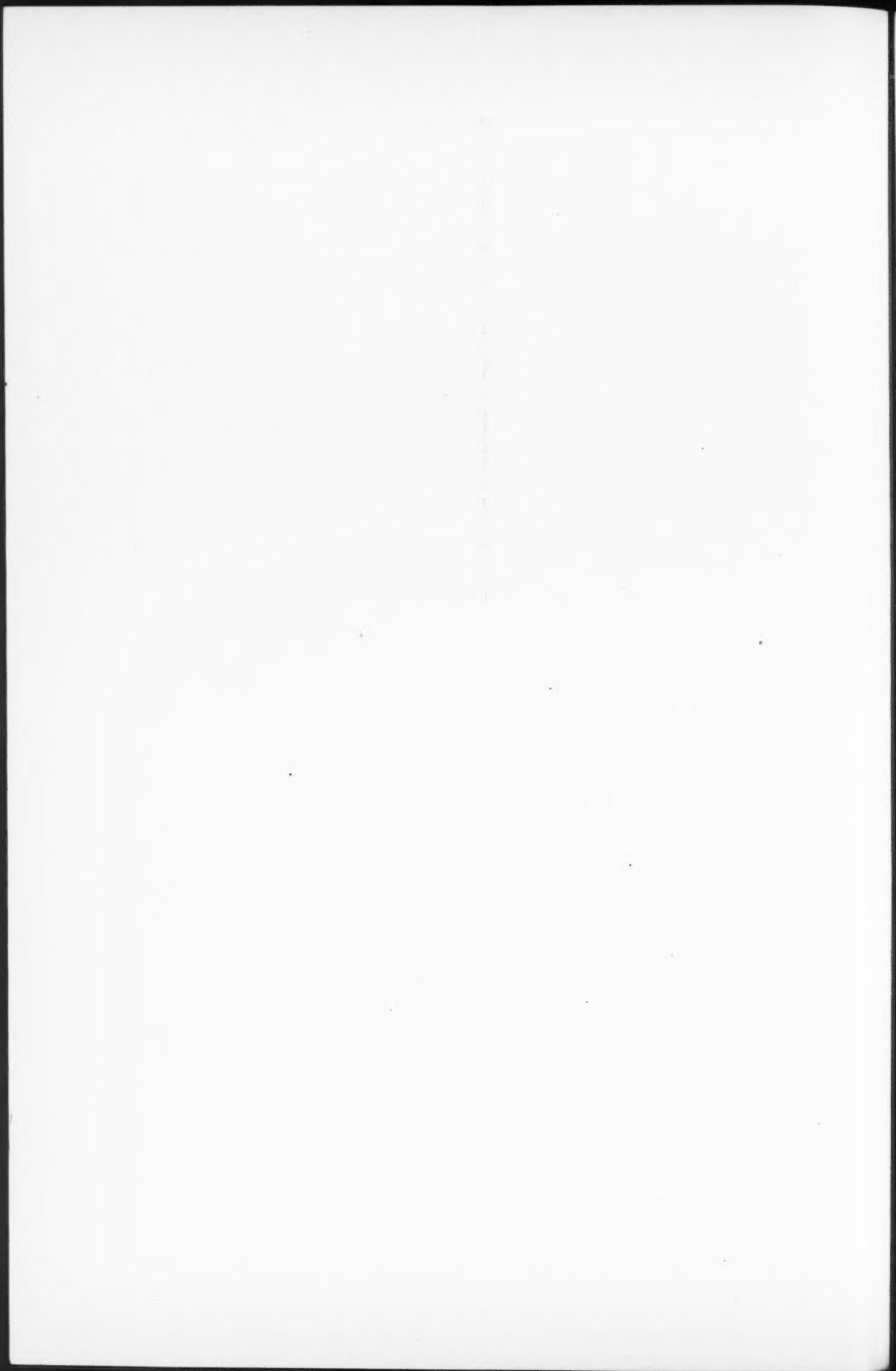
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Pre-Convention Bulletin

Reports of Officers and Committees

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**SALUTATION
FROM PRESIDENT MORROW**

*To Members of the California
Medical Association—*

Greetings:

I salute you in the name of our profession and extend to you a very cordial invitation to attend the sixty-seventh annual session of your Association in Pasadena, May 9 to 12.

Our annual session affords the opportunity for every member to acquire information upon medical progress by hearing the presentations and discussions of competent clinicians and teachers. In addition, there are the inspiration and pleasure of meeting one's friends, forming new acquaintances, and engaging in the scheduled social functions. The personal benefits received more than compensate for the time spent in attending. A careful reading of the announcements, therefore, should induce you to plan to be present, and I sincerely trust that you will come.

At this time, I desire to officially extend expressions of appreciation to the section officers and speakers for their labor and contribution of time in preparing and taking part in the scheduled program. The success, the benefits, and the good that attends this session will be largely due to your efforts. We are grateful for your services and coöperation.

Lastly, may I emphasize anew that your membership affiliation is one of your most valuable possessions. Your loyalty to your county and state medical organizations will materially enhance the results accruing to you as a member. I bespeak your continued interest and sustained support, to the end that our Association and its constituent units may meet the problems of the times, and formulate well considered and directed solutions that will greatly help to secure public confidence and good will. We can lead, instead of being led.



HOWARD MORROW, M.D.
President, California Medical Association
1938

Cordially,

HOWARD MORROW, *President.*

**GUEST SPEAKERS AT THE SIXTY-SEVENTH ANNUAL SESSION
CALIFORNIA MEDICAL ASSOCIATION**

Speakers at General Meetings



UDO J. WILE, M.D.
Professor of Dermatology and Syphilology, University
of Michigan Medical School, Ann Arbor, Michigan



ALFRED BLALOCK, M.D.
Professor of Surgery, Vanderbilt University, Nash-
ville, Tennessee



TINSLEY R. HARRISON, M.D.
Associate Professor of Medicine, Vanderbilt Univer-
sity, Nashville, Tennessee



ALEXIS FRANK HARTMANN, M.D.
Associate Professor of Pediatrics, Washington Uni-
versity, School of Medicine, St. Louis, Missouri



WILLIAM W. ROBLEE
President-Elect

SECTION OFFICERS



EDWIN L. BRUCK
Chairman, General Medicine



HARLAN SHOEMAKER
Chairman, General Surgery



R. GLENN CRAIG
Chairman, Obstetrics and
Gynecology



HOWARD F. WEST
Secretary, General Medicine



NELSON J. HOWARD
Secretary, General Surgery



JOHN N. EWER
Secretary, Obstetrics and
Gynecology

SECTION OFFICERS



FRANK BAXTER
Chairman, Eye, Ear, Nose and
Throat



WILLIAM LEROY GARTH
Chairman, Anesthesiology



STANLEY O. CHAMBERS
Chairman, Dermatology and
Syphilology



CLIFFORD B. WALKER
Secretary, Eye, Ear, Nose and
Throat



JOHN G. DUNLOP
Secretary, Anesthesiology



NELSON PAUL ANDERSON
Secretary, Dermatology and
Syphilology



FREDERIC C. BOST
Chairman, Industrial Medicine
and Surgery



GEORGE H. SANDERSON
Secretary, Industrial Medicine
and Surgery



FRED O. BUTLER
Chairman, Neuropsychiatry

SECTION OFFICERS



JOHN B. DOYLE
Secretary, Neuropsychiatry



GERTRUDE MOORE
Chairman, Pathology and
Bacteriology



GEORGE D. MANER
Secretary, Pathology and
Bacteriology



E. E. MOODY
Chairman, Pediatrics



HARTZELL H. RAY
Secretary, Pediatrics



JOHN D. LAWSON
Chairman, Radiology



KARL M. BONOFF
Secretary, Radiology



LLOYD E. KINDALL
Chairman, Urology



CARL F. RUSCHE
Secretary, Urology

Part I PROGRAM

THE SIXTY-SEVENTH ANNUAL SESSION of the CALIFORNIA MEDICAL ASSOCIATION

TO BE HELD AT

HOTEL HUNTINGTON, PASADENA

MAY 9-12, 1938

OFFICERS AND COMMITTEES, 1938

GENERAL OFFICERS

HOWARD MORROW, San Francisco, President
WILLIAM W. ROBLEE, Riverside, President-Elect
EDWARD M. PALLETTE, Los Angeles, Past President
LOWELL S. GOIN, Los Angeles, Speaker of House of Delegates
JOHN H. GRAVES, San Francisco, Vice-Speaker of House of Delegates
MORTON R. GIBBONS, San Francisco, Chairman of Council
KARL L. SCHAUPP, San Francisco, Chairman, Executive Committee
FREDERICK C. WARNSHUIS, San Francisco, Secretary-Treasurer
GEORGE H. KRESS, Los Angeles, Editor
C. A. DUKES, Oakland, Chairman, Committee on Public Relations
HARTLEY F. PEART, San Francisco, General Counsel
HUBERT T. MORROW, Los Angeles, Associate General Counsel

COUNCILORS

First District

Calvert L. Emmons, Ontario (1938)
Imperial, Orange, Riverside, San Bernardino,
and San Diego Counties

Second District

Carl R. Howson, Los Angeles (1939)
Los Angeles County

Third District

Louis A. Packard, Bakersfield (1940)
Kern, San Luis Obispo, Santa Barbara, and
Ventura Counties

Fourth District

Axcel E. Anderson, Fresno (1938)
Chlaveras, Fresno, Inyo, Kings, Madera, Mariposa, Merced,
Mono, San Joaquin, Stanislaus, Tulare and
Tuolumne Counties

Fifth District

Alfred L. Phillips, Santa Cruz (1939)
Monterey, San Benito, San Mateo, Santa Clara
and Santa Cruz Counties

Sixth District

Karl L. Schaupp, San Francisco (1940)
San Francisco County

Seventh District

Oliver D. Hamlin, Oakland (1938)
Alameda and Contra Costa Counties

Eighth District

Frederick N. Scatena, Sacramento (1939)
Alpine, Amador, Butte, Colusa, El Dorado, Glenn, Lassen,
Modoc, Nevada, Placer, Plumas, Sacramento, Shasta,
Sierra, Sutter, Tehama, Yolo and Yuba Counties

Ninth District

Henry S. Rogers, Petaluma (1940)
Del Norte, Humboldt, Lake, Marin, Mendocino, Napa,
Siskiyou, Solano, Sonoma and Trinity Counties

Councillors-at-Large

Junius B. Harris, Sacramento (1940)
Harry H. Wilson, Los Angeles (1938)
C. O. Tanner, San Diego (1939)
William H. Kiger, Los Angeles (1940)
Morton R. Gibbons, San Francisco (1938)
T. Henshaw Kelly, San Francisco (1939)

DELEGATES AND ALTERNATES TO A. M. A.

Delegates	Sessions	Alternates
C. A. Dukes	(1938)	Edward N. Ewer
Oakland		Oakland
Edward M. Pallette	(1938)	W. H. Kiger
Los Angeles		Los Angeles
Robert A. Peers	(1938)	F. F. Gundrum
Colfax		Sacramento
William R. Molony, Sr.	(1938)	John C. Ruddock
Los Angeles		Los Angeles
Elbridge Best	(1938-1939)	Robert S. Stone
San Francisco		San Francisco
Lyell C. Kinney	(1938-1939)	Bon O. Adams
San Diego		Riverside
J. P. Nuttall	(1938-1939)	F. M. Pottenger
Los Angeles		Los Angeles

STANDING COMMITTEES

Executive Committee

The President, the President-elect, the Speaker of the House of Delegates, the Chairman of the Council, the Chairman of the Auditing Committee, the Chairman of the Committee on Public Relations, the Past President, the Secretary-Treasurer and the Editor. (Karl L. Schaupp, chairman; Frederick C. Warnshuis, secretary.)

Auditing Committee

O. D. Hamlin, Oakland.....1938
T. Henshaw Kelly, San Francisco.....1938
Karl L. Schaupp (Chairman), San Francisco.....1938
Members of the Auditing Committee are appointed each year by the Chairman of the Council.

Committee on Associated Societies and Technical Groups

Edwin L. Bruck, San Francisco.....1938
William H. Geistweit, San Diego.....1939
John V. Barrow (Chairman), Los Angeles.....1940

Committee on Health and Public Instruction

Fred B. Clarke (Chairman), Long Beach.....1938
W. R. P. Clark, San Francisco.....1939
Benjamin W. Black, Oakland.....1940

Committee on History and Obituaries

Frank R. Makinson (Chairman), Oakland.....1938
J. Marion Read, San Francisco.....1939
A. Elmer Belt, Los Angeles.....1940
Secretary.....Ex officio
Editor.....Ex officio

Committee on Hospitals, Dispensaries and Clinics

George Dawson, Napa.....1938
Daniel Crosby (Chairman), Oakland.....1939
Karl L. Schaupp, San Francisco.....1940

Committee on Industrial Practice

Morton R. Gibbons (Chairman), San Francisco.....1938
Philip Stephens, Los Angeles.....1939
Harry E. Zaiser, Orange.....1940

Committee on Medical Defense

George G. Reinle (Chairman), Oakland.....1938
Fred R. De Lappe, Modesto.....1939
John P. Nuttall, Santa Monica.....1940

Committee on Medical Economics

John H. Graves (Chairman), San Francisco.....1938
William R. Molony, Sr., Los Angeles.....1939
Edward M. Pallette, Los Angeles.....1940

Committee on Medical Education and Medical Institutions

B. O. Raulston, Los Angeles.....1938
Loren R. Chandler (Chairman), San Francisco.....1939
John B. Doyle, Los Angeles.....1940

Committee on Membership and Organization

E. Vincent Askey (Chairman), Los Angeles.....1938
Dewey R. Powell, Stockton.....1939
G. Dan Delprat, San Francisco.....1940
Secretary.....Ex officio

Committee on Postgraduate Activities

F. E. Clough, San Bernardino.....1938
F. F. Gundrum, Sacramento.....1939
John C. Ruddock (Chairman), Los Angeles.....1940
Secretary.....Ex officio

Committee on Publications

Ruggles A. Cushman, Talmage.....	1938
Oscar Reiss, Los Angeles.....	1939
Ralph Eusden (Chairman), Los Angeles.....	1940
Secretary.....	Ex officio
Editor.....	Ex officio

Committee on Public Policy and Legislation

Junius B. Harris (Chairman), Sacramento.....	1938
F. M. Henshaw Kelly, San Francisco.....	1939
E. T. Remmen, Glendale.....	1940
President.....	Ex officio
President-elect.....	Ex officio

Committee on Scientific Work

J. Homer Woolsey, Woodland.....	1938
F. M. Pottenger, Monrovia.....	1939
Lemuel P. Adams, Oakland.....	1940
Howard F. West, Secretary of Section on General Medicine.....	Ex officio
Nelson J. Howard, Secretary of Section on General Surgery.....	Ex officio
Frederick C. Warnshuis (Chairman).....	Ex officio

Committee on Public Relations

The Committee on Public Relations consists of the chairmen of the following standing committees and of certain general officers of the Association, all serving ex officio. The chairman of the committee is Charles A. Dukes. The Secretary is Frederick C. Warnshuis. The director of the Department of Public Relations is Frederick C. Warnshuis. The chairman of the Committee on Public Relations is, ex officio, a member of the Council.

Fred B. Clarke, Chairman, Committee on Health and Public Instruction.

Daniel Crosby, Chairman, Committee on Hospitals, Dispensaries, Clinics.

Morton R. Gibbons, Chairman, Committee on Industrial Practice.

E. Vincent Askey, Chairman, Committee on Membership and Organization.

John H. Graves, Chairman, Committee on Medical Economics.

Junius B. Harris, Chairman, Committee on Public Policy and Legislation.

Charles A. Dukes, Chairman, Cancer Commission.

John C. Ruddock, Chairman, Committee on Postgraduate Activities.

Howard Morrow, President of California Medical Association.

William W. Roblee, President-elect.

Frederick C. Warnshuis, Secretary-Treasurer.

Communications for the Public Relations Department should be addressed to the Director, Frederick C. Warnshuis, M.D., Room 2004, 450 Sutter Street, San Francisco.

Cancer Commission

Orville Meland (Secretary for Southern Section), Los Angeles.....	1938
A. Herman Zeller, Los Angeles.....	1938
Gertrude Moore, Oakland.....	1938
Harold Brunn, San Francisco.....	1939
Henry J. Ullmann, Santa Barbara.....	1939
Clarence G. Toland, Los Angeles.....	1939
Charles A. Dukes (Chairman), Oakland.....	1940
Lyell C. Kinney (Vice-Chairman), San Diego.....	1940
Otto H. Pfeuger (Secretary), San Francisco.....	1940
Communications for the Cancer Commission should be addressed to the secretary, Otto H. Pfeuger, M.D., Room 2004, 450 Sutter Street, San Francisco.	

SPECIAL COMMITTEES**Committee on a Qualifying Certificate (Basic Science) Law**

George H. Kress (General Chairman).....	Los Angeles
Morton R. Gibbons (Chairman for Bay Region).....	San Francisco
Edward M. Pallette (Chairman for Southern California).....	Los Angeles
Junius B. Harris (Chairman for Remainder of State).....	Sacramento

Committee on Animal Experimentation

Philip K. Gilman (Chairman).....	San Francisco
Charles A. Dukes.....	Oakland
Loren R. Chandler.....	San Francisco

Committee on Maternal Welfare

Lyle G. McNeile (Chairman).....	Los Angeles
T. Henshaw Kelly.....	San Francisco
Ralph J. Thompson.....	Los Angeles
T. Floyd Bell.....	Oakland
Hans F. Schluter.....	Sacramento

Committee on Golden Gate International Exposition

T. Henshaw Kelly (Chairman).....	San Francisco
Edward M. Pallette.....	Los Angeles
Frederick C. Warnshuis.....	San Francisco
Charles A. Dukes.....	Oakland
Karl Meyer.....	San Francisco
Hartley F. Peart.....	San Francisco

Committee on Syphilis

Howard Morrow (Chairman).....	San Francisco
Charles W. Barnett.....	San Francisco
William H. Goeckerman.....	Los Angeles

Committee on California Medical Economic Survey

Edward M. Pallette (Chairman).....	Los Angeles
Howard Morrow.....	San Francisco
George H. Kress.....	Los Angeles

Local Convention Committees**Local Committee on Arrangements—Pasadena Session**

Paul C. Blaisdell (Chairman).....	Pasadena
L. Grant Baldwin.....	Pasadena
Edward Jones.....	Pasadena
W. J. Woolston.....	Pasadena

Committee in Charge of Public Meeting

R. C. Olmstead.....	Pasadena
Lyle G. Craig.....	Pasadena
E. D. Kremers.....	Pasadena
Fred B. Clarke.....	Long Beach
George H. Kress.....	Los Angeles
George D. Maner.....	Los Angeles

Committee on Transportation

Harry F. Markolf (Chairman).....	Pasadena
Russell M. Decker.....	Pasadena
Leland M. Evans.....	Pasadena
W. G. Scanlon.....	Pasadena
C. H. Briggs.....	Pasadena

Committees on Golf

Edward B. Dewey (Chairman).....	Pasadena
Robert K. Gustafson.....	Pasadena
Harvey J. Forbes.....	Pasadena
Alvin Ford.....	Pasadena

REGISTRATION INFORMATION

Registration and Information. The registration and information desk is located in the patio, Hotel Huntington. All persons attending the convention, whether members or not, are requested to register immediately on arrival. Beginning Monday, May 9, registration secretaries will be on duty daily from 9 a. m. until 7 p. m.

Programs and "Pre-Convention Bulletin." The registration clerks will give to every member a copy of the program. The "Pre-Convention Bulletin" will be printed in the April issue of CALIFORNIA AND WESTERN MEDICINE. Delegates and alternates are especially requested to read the reports of officers and committees.

Guests and Visitors. All guests and visitors are requested to register. All general meetings and scientific meetings are open to visitors and guests.

Badges. Four kinds of badges will be issued by the registration bureau:

1. **Members.** Only active, associate, retired or honorary members of the California Medical Association will be given the usual membership badge.

2. **Guests.** A guest badge will be issued to all fraternal delegates and visiting physicians who are attending this year's session.

3. **Delegates and Alternates.** The usual official badge for each delegate and alternate is provided for this purpose, and will be issued only to one authorized to wear it.

4. **Officers.** An official badge is provided for all officers and members of the Council.

Suggestions and Constructive Criticism. The officers and committees have tried to do everything possible to make the session a success. Suggestions and constructive criticism calculated to make future sessions more useful will be welcomed by any of the officers. Complaints of whatever character should be promptly made at the registration desk, where they will receive attention.

General Announcements

1. Members are requested to register and obtain their copy of official program and special announcements.

2. Delegates will please file their credentials with the Credentials Committee between 7:00 and 8:00 p. m., Monday, May 9.

3. **Special Announcements:** For these, consult bulletin board.

4. **Visit the Exhibits:** Located in the Patio.

5. **President's Dinner:** Guests of the Hotel Huntington will obtain special tickets from room clerk. Others will obtain banquet tickets at the registration desk. Price \$2.50 per plate.

6. Section meeting places are posted on the lobby directory.

7. For general or special information, consult the clerks at the registration desk.

MEMBERS OF HOUSE OF DELEGATES—35th ANNUAL SESSION

TOTAL DELEGATES (154)

DELEGATES EX OFFICIO (23)

Howard Morrow, San Francisco.....	President
William W. Roblee, Riverside.....	President-elect
Edward M. Palette, Los Angeles.....	Past President
Lowell S. Goin, Los Angeles.....	Speaker of House of Delegates
John H. Graves, San Francisco.....	Vice-Speaker of House of Delegates
Frederick C. Warnshuis, San Francisco.....	Secretary-Treasurer
George H. Kress, Los Angeles.....	Editor
C. L. Emmons, Riverside (1938).....	Councilor 1st District
Carl R. Howson, Los Angeles (1939).....	Councilor 2nd District
Louis A. Packard, Bakersfield (1940).....	Councilor 3rd District
Axel E. Anderson, Fresno (1938).....	Councilor 4th District
Alfred L. Phillips, Santa Cruz (1939).....	Councilor 5th District
Karl L. Schaupp, San Francisco (1940).....	Councilor 6th District
Oliver D. Hamlin, Oakland (1938).....	Councilor 7th District
Frederick N. Scatena, Sacramento (1939).....	Councilor 8th District
Henry S. Rogers, Petaluma (1940).....	Councilor 9th District
Harry H. Wilson, Los Angeles (1938).....	Councilor-at-Large
C. O. Tanner, San Diego (1939).....	Councilor-at-Large
William H. Kiger, Los Angeles (1940).....	Councilor-at-Large
Morton R. Gibbons, San Francisco (1938).....	Councilor-at-Large
T. Henshaw Kelly, San Francisco (1939).....	Councilor-at-Large
Junius B. Harris, Sacramento (1940).....	Councilor-at-Large
C. A. Dukes, Oakland.....	Chairman, Committee on Public Relations

ELECTED DELEGATES

Delegates

Alternates

Alameda County (11)	
A. A. Alexander	T. F. Bell
Dorothy Allen	W. G. Donald
Leonard Barnard	Fred Ewing
Clarence A. DePuy	Lloyd Kindall
John Dougherty	George Nesche
Edward N. Ewer	Robert S. Peers
Sumner Everingham	T. Eric Reynolds
H. Gordon MacLean	A. C. Seifert
Frank R. Makinson	D. D. Toffelmier
George G. Reindle	H. G. Trimble
H. J. Templeton	H. H. Appeldorn
Butte County (1)	
Joseph O. Chlapella	N. T. Enloe
Contra Costa County (1)	
Sol N. Weil	L. H. Fraser
Fresno County (3)	
G. W. Walker	C. I. Pendergrass
E. J. Schmidt	S. A. Quimby
R. S. Scott	B. Sorauf
Humboldt County (1)	
Allan Watson	Curtis Lane Falk
Imperial County (1)	
L. C. House	Phillip Hodgkin
Kern County (1)	
C. S. Compton	F. J. Gundry
Kings County (1)	
Name not received	Name not received
Lassen-Plumas-Modoc Counties (1)	
Name not received	Name not received
Los Angeles County (45)	
L. A. Aleson	F. X. Ammann
E. Vincent Askey	C. Max Anderson
Samuel Ayres, Jr.	V. L. Andrews
Wilbur Bailey	A. A. Blatherwick
Harold Dewey Barnard	Lewis P. Bolander
Karl M. Bonoff	Henry T. S. Bonesteel
T. D. Caruso	H. B. Breitman
H. L. Charles	E. M. Burns
Fred B. Clarke	O. W. Butler
Walter R. Crane	Donald Cass
John W. Crossan	R. Manning Clarke
William H. Daniel	A. B. Cooke
Edward B. Dewey	Cyril B. Courville
George Dock	Charles H. Cowgill
Wallace Dodge	Egerton Crispin
Ralph B. Eusden	R. L. Cunningham
Alvin G. Foord	Wirt B. Dakin
Henry C. Gernand	Kenneth S. Davis
Orrie Ghrist	John B. Doyle
V. J. Keating	Roy E. Fallas
E. Eric Larson	William V. C. Francis

Delegates

William H. Leake
George D. Maner
William R. Molony, Sr.
E. Earl Moody
Thomas Chalmers Myers
John W. Nevius
John P. Nuttall
Frank W. Otto
Charles E. Phillips
Sterling N. Pierce
F. M. Pottenger, Jr.
H. A. Putnam
Robert E. Ramsay
E. T. Remmen
John C. Ruddock
Philip Stephens
F. C. Swearingen
R. G. Taylor
Roy E. Thomas
Donald G. Tollefson
George D. Wells
Walter Wessels
Howard F. West
A. Herman Zeller

Alternates

John D. Gillis
Leland Hawkins
Charles M. Hayes
Malcolm R. Hill
A. B. Hromadka
Morrill L. Iisley
Isaac H. Jones
W. E. Macpherson
Orville Meland
Robert J. Moes
George H. Patterson
Paul A. Quaintance
Marcus Rabwin
Oscar Reiss
Paul B. Roen
H. E. Schiffbauer
V. DeMott Sedgwick
Kenneth E. Smiley
Willard Stone
Roy A. Terry
H. V. Van Fleet
Harry J. Wiley
Burnett W. Wright
Charles S. Young

Marin County (1)

Carl W. Clark

Mendocino-Lake Counties (1)

Thomas P. Hill

Merced County (1)

A. C. Atwood

Monterey County (2)

W. H. Farr
J. A. Merrill

Napa County (1)

Dwight H. Murray

Orange County (3)

Milo K. Tedstrom
Harold F. Gobar
Merrill Hollingsworth

Placer County (1)

Mildred E. Thoren

Riverside County (2)

H. L. Ratliff
R. B. McCarty

Sacramento County (3)

Wayne Pollock
Paul Guttman
Ralph Teall

San Benito County (1)

R. S. Geen

San Bernardino County (3)

T. I. Zirkle
R. C. Nichols
A. L. Weber

San Diego County (6)

B. F. Eager
Ralph Kayser
W. L. Garth
J. G. Omelvena
W. W. Belford
C. W. Lane

San Francisco County (17)

Zera E. Bolin
Leroy Brooks
Howard A. Brown
John W. Cline
Leo Henry Garland
Ernst Gehrels
Frank Hand
Nelson J. Howard
Thomas J. Lennon
Mary Jones Mentzer
James W. Morgan
Gunter W. Nagel
Gerald B. O'Connor
Leon O. Parker
Robert S. Stone
David A. Wood
Rodney A. Yoell

San Joaquin County (3)

C. A. Broadus
G. H. Rohrbacher
C. V. Thompson

San Luis Obispo County (1)

Earl B. King

San Mateo County (2)

N. D. Morrison
H. Wade Macomber

Hartzell H. Ray
J. Garwood Bridgman

Charles R. Kennedy

D. R. Powell
G. H. Sanderson
J. F. Doughty

H. Glenn Bell
Elbridge J. Best
Frederic C. Bost
Edwin L. Bruck
G. Dan Delprat
J. C. Geiger
Thomas E. Gibson
Phillip K. Gilman
Harold A. Hill
Irving S. Ingber
Alson R. Kilgore
Stanley H. Mentzer
Robert R. Newell
George Warren Pierce
Dohrmann K. Pischel
John J. Sampson
Roland P. Seitz

Delegates

H. E. Henderson
Caleb Stone
E. L. Markthaler

Stanley R. Kneeshaw
Cecil M. Burchfiel
Russel V. Lee
C. Kelly Canelo

M. D. McPherson

Name not received

James B. McQuire

John W. Green

*Alternates***Santa Barbara County (3)**

Hugh Freidell
Dan M. Clark
P. A. Gray

Santa Clara County (4)

Merlin T.-R. Maynard
George L. Barry
John H. Shephard
Earl O. G. Schmitt

Santa Cruz County (1)

R. Rood

Shasta County (1)

Name not received

Siskiyou County (1)

Edward F. Carlson

Solano County (1)

Durward B. Park

Alternates

A. A. Thurlow

R. S. Hiatt

O. T. Wood

R. C. Hill

G. C. Coffey

John H. Woolsey

Stanley Parkinson

*Delegates***Sonoma County (1)**

L. W. Hines

Stanislaus County (1)

Hans Hartman

Tehama County (1)

R. G. Frey

Tulare County (1)

Austin V. Miller

Ventura County (1)

A. A. Morrison

Yolo-Colusa-Glenn Counties (1)

Joseph E. Tillotson

Yuba-Sutter Counties (1)

E. E. Gray

Schedule of Daily Meetings

Place	Monday		Tuesday		Wednesday		Thursday
	10:00 A. M.	1:30-4:00 P. M.	8:30-11:00 A. M.	1:00 P. M.	8:30-11:00 A. M.	1:30-4:00 P. M.	9:00-12:00 A. M.
Ballroom	Opening General Meeting	Medicine	Medicine 11:15 Second General Meeting	AFTERNOON OPEN FOR ENTERTAINMENT	Medicine and Pediatrics 11:15 Third General Meeting	† Symposium on "Shock"	Medicine
Crystal Room		Surgery	Surgery		Surgery	Industrial Medicine and Surgery	Surgery
Tap Room		Obstetrics and Gynecology	Neuro-psychiatry		Obstetrics and Gynecology		
Cottage "A"		Eye, Ear, Nose and Throat	Eye, Ear, Nose and Throat		Urology	Urology	
Cottage "B"		Dermatology and Syphilology	Dermatology and Syphilology			Neuro-psychiatry	
Cottage "C"		Pediatrics	Radiology and Industrial Medicine				
Cottage "D"		Industrial Medicine	Pathology and Bacteriology		Radiology	Radiology	
Cottage "E"		Pathology and Bacteriology					
Cottage "F"		Anesthesiology					
Rooms 447-48	Council		Council		Council		
Ballroom		8:00 P. M. House of Delegates		7:30 P. M. President's Dinner		8:00 P. M. House of Delegates	
Dining Room		9:00 P. M. Musicales					
Private Dining Room	7:30 A. M. Past Presidents' Breakfast						
Crystal Room						4:15 P. M. Medical Society of the State of California	

† On Wednesday afternoon the following Sections will join in a Symposium on "Shock": Medicine, Surgery, Obstetrics and Gynecology, Eye, Ear, Nose and Throat, Pediatrics, Pathology and Anesthesiology.

PROGRAM: BY DAYS

Sunday, May 8

9:00 a. m. to 4:30 p. m.—Clinical Pathological Conference.
(To be held in Room 359 Science Building, University of Southern California, Thirty-sixth Place and University Avenue, Los Angeles.)

10:00 a. m. to 4:00 p. m.—Radiological Conference.
(To be held in Main Ballroom, Huntington Hotel.)

8:00 p. m.—Council Meeting.

Monday, May 9

10:00 a. m.—Opening General Meeting.
(Main Ballroom, Huntington Hotel.)

1:30 p. m.—Scientific Section Meetings.

8:00 p. m.—House of Delegates: First Meeting.

Tuesday, May 10

7:30 a. m.—Past Presidents' Breakfast.

8:30 a. m.—Section Meetings.

11:15 a. m.—General Meeting—Clinical-Pathological Conference.

1:00-6:00 p. m.—Recreation. (No scientific meetings during this period.)

7:30 p. m.—President's Dinner; Reception and Dance.

Wednesday, May 11

8:30 a. m.—Section Meetings.

11:15 a. m.—General Meeting.

1:30 p. m.—Section Meetings.

4:15 p. m.—Medical Society of State of California.

8:15 p. m.—House of Delegates.

Thursday, May 12

8:30 a. m.—Section Meetings.

9:00 a. m.—Council Meeting.

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Note.—Council meets daily.

Watch bulletin board for special announcements.

Visit Commercial Exhibits.

Secure tickets for President's dinner at registration desk before Tuesday noon.



I—GENERAL MEETINGS

All General Meetings will be held in the Main Ballroom, Hotel Huntington

First General Meeting

Monday, May 9, 10 a. m.

1. *Address of Welcome*—George H. Kress, M. D., President, Los Angeles County Medical Association.
2. *Announcements*—Secretary F. C. Warnshuis, M. D.
3. *President's Annual Address*—Howard Morrow, M. D., San Francisco.
4. *The Relation of Syphilis to Surgical Problems*—Udo J. Wile, M. D., Ann Arbor, Michigan, Professor of Dermatology and Syphilology, University of Michigan. (By invitation.)

Second General Meeting

Tuesday, May 10, 11:15 a. m.

President Howard Morrow, Presiding

1. *Clinical-Pathological Conference*—Conducted by Alfred Blalock, M. D., Professor of Surgery, Vanderbilt University, Nashville, Tennessee; and Tinsley R. Harrison, M. D., Associate Professor of Medicine, Vanderbilt University, Nashville, Tennessee.

Note.—The clinical history and laboratory findings of three cases will be presented. These case reports will then be discussed and diagnoses suggested. Following this, Dr. A. G. Foord will present the protocols and final pathological diagnoses.

Third General Meeting

Wednesday, May 11, 11:15 a. m.

President Howard Morrow, Presiding

1. *The Clinical Usage of Estrogenic Hormones*—C. Fred-eric Fluhmann, M. D., Associate Professor of Obstetrics and Gynecology, Stanford University, California. (By invitation.)
Modern investigations have revealed a wide distribution of substances capable of stimulating the accessory genital organs. The "estrogenic hormones" are of clinical importance from two standpoints: (1) as diagnostic tests, (2) as therapeutic agents. The present paper is a discussion of the value of such tests and of the indications, preparations, and methods of administration of these substances.
2. *Sulfanilamid, with Particular Reference to Changes in the Acid-Base Balance and to Methemoglobin Formation*—Alexis F. Hartmann, M. D., Professor of Pediatrics, Washington University, St. Louis, Missouri.

Very promptly following the administration of sulfanilamid to normal human subjects, there occur hyperpnea and rise in plasma pH, to be followed promptly by excretion of alkali into the urine and reduction of plasma bicarbonate. The early effect, then, is the production of a carbon dioxide deficit type of alkalosis, and not acidosis. Later, because of the apparently compensatory reduction of plasma bicarbonate, total fixed base deficiency may occur which may facilitate the development of acidosis by contributing factors.

The development of methemoglobinemia may very effectively be prevented or relieved by methylene blue.

II—SECTION MEETINGS

SCIENTIFIC SECTION PROGRAMS

(Numbers in parenthesis after each section indicate sequence reference numbers of papers read in each section.)

I.—General Medicine (1-15).....	11
II.—General Surgery (16-36).....	13
III.—Obstetrics and Gynecology (37-46).....	15
IV.—Eye, Ear, Nose and Throat (47-52a).....	16
V.—Anesthesiology (53-57).....	17
VI.—Dermatology and Syphilology (58-70).....	17
VII.—Industrial Medicine and Surgery (71-79).....	18
VIII.—Neuropsychiatry (80-89).....	19
IX.—Pathology and Bacteriology (90-98).....	20
X.—Pediatrics (99-107).....	21
XI.—Radiology (108-121).....	22
XII.—Urology (122-134).....	23

Rules Regarding Papers and Discussions at the State Meetings

Upon the recommendation of the Executive Committee the following rules regarding papers have been adopted by the Council:

1. The maximum time that may be consumed by any paper is fifteen minutes, provided that not to exceed ten minutes' latitude may be allowed invited guests at the discretion of the presiding chairman.
2. Motions from the floor to extend the time of an author may be entertained by the presiding officer.
3. The maximum time permitted any individual to discuss a paper is four minutes. This also applies to the author in closing his discussion. No speaker may discuss more than once any one subject.
4. A copy of each and every paper presented at the state meeting must be in the hands of the chairman or secretary of the section or in the hands of the general secretary before the paper is presented.
5. All papers read at the annual meeting shall be published in full in CALIFORNIA AND WESTERN MEDICINE as soon after the meeting as space will permit, or at the option of the author, an abstract of the paper of about one column in length shall be published as soon as possible after the meeting, with reprints in full of the entire paper (the cost of setting up type for the reprint to be borne by the Association, and all other costs to be borne by the author).
6. Articles are accepted for publication on condition that they are contributed solely to CALIFORNIA AND WESTERN MEDICINE. Authors desiring to publish their papers elsewhere than in the JOURNAL may have their manuscripts returned to them upon written request to the editor.
7. No paper will be accepted by the General Program Committee nor by Section Program Committees unless accompanied by a synopsis of not to exceed fifty words.
8. Papers shall not be "read by title."
9. No member may present more than one paper at any one state meeting, provided that a member may be a collaborator on more than one paper, if these papers are presented by different authors.
10. Failure on the part of an author to present a paper precludes acceptance of future papers from such author for a period of two years, unless the author explains to the satisfaction of the Executive Committee his inability to fulfill his obligation.

Section Papers: How Numbered

For convenience in reference, papers are numbered in serial sequence for the entire session, instead of a separate sequence for each section.

Business Meetings of Sections

Time of business meetings and elections of officers of sections will be scheduled on section blackboards by section secretaries, and through preliminary announcements by section chairmen.

Unless otherwise announced, the business meetings of each section and the election of officers will be held immediately after the reading of the second paper on the second day's section program.

I

GENERAL MEDICINE SECTION

EDWIN L. BRUCK, M.D., *Chairman*
384 Post Street, San Francisco

HOWARD F. WEST, M.D., *Secretary*
1930 Wilshire Boulevard, Los Angeles

First Meeting—Ballroom*

Monday, May 9, 1:30 p. m.

1. *Electrocardiographic Study of Coronary Thrombosis—The Value of the Chest Lead in Determining the Location of the Infarct*—William H. Leake, M.D., 1930 Wilshire Boulevard, Los Angeles; G. Creswell Burns, M.D., 1052 West Sixth Street, Los Angeles; Wilbur A. Beckett, M.D., 3875 Wilshire Boulevard, Los Angeles.

The death charts of approximately one hundred and fifty patients dying as a result of coronary thrombosis have been reviewed. The electrocardiograms and autopsy findings were analyzed in each case in an attempt to determine the value of the chest lead in localizing the infarct.

Discussion by John Kent Lewis, M.D., San Francisco; E. Richmond Ware, M.D., Los Angeles.

2. *A Concept of Angina Pectoris with Applications to Therapy*—M. H. Nathanson, M.D., 2007 Wilshire Boulevard, Los Angeles.

The clinical syndrome, angina pectoris, cannot be adequately explained solely on the basis of occlusive coronary disease with myocardial ischemia. Evidence is presented implicating the cardiac sympathetic innervation and a concept suggested that angina pectoris results from the synergistic action of myocardial ischemia and sympathetic nervous activity. Experiments demonstrating methods to reduce cardiac sympathetic tone are presented and the practical application to therapy is suggested.

Discussion by John J. Sampson, M.D., San Francisco; James F. Churchill, M.D., San Diego.

3. *Cardiac Dyspnea*—Tinsley R. Harrison, M.D. (by invitation), Vanderbilt University, Nashville, Tennessee.

The address will include a discussion of the types of dyspnea occurring in patients with heart disease, the underlying and precipitating causes of such dyspnea, the effects of dyspnea, and the treatment of this symptom.

4. *Heart Failure in Vitamin B₁ Deficiency*—Clifford B. Cherry, M.D., 1030 Kansas Street, San Francisco.

Heart failure due to deficiency of vitamin B₁ is of not infrequent occurrence. Its early recognition is of especial importance because an adequate therapy is available. Diagnosis and treatment are discussed, and the return of the heart to normal size under treatment is illustrated by roentgenograms.

Discussion by Jay Marion Read, M.D., San Francisco; Arthur A. Marlow, M.D., La Jolla.

5. *The Heart in Pneumoconiosis*—Charles B. Coggin, M.D., Donald E. Griggs, M.D., and Walter D. Stilson, M.D., 312 North Boyle Avenue, Los Angeles.

This is a study of the effect of pneumoconiosis upon the heart as it can be elicited clinically, by routine x-ray films, and as it is found at autopsy. The clinical records, x-ray films, and protocols of one hundred autopsied cases at Los Angeles County Hospital are reviewed.

Discussion by R. Manning Clarke, M.D., Los Angeles; Roy E. Thomas, M.D., Los Angeles.

*Following the adjournment of this program, the California Heart Association will hold its annual meeting in this room. All members of the Heart Association and others interested are urged to remain.

Second Meeting—Ballroom**Tuesday, May 10, 8:30 a. m.**

6. *Trichiniasis: Report of an Outbreak of Twenty-Five Cases*—Hyman I. Vener, M.D., C.P.H.; George M. Stevens, M.D., Los Angeles City Health Department, 116 West Temple Street, Los Angeles.

An epidemiological investigation conducted by the Department of Epidemiology, Los Angeles City Health Department, and confirmed by definite laboratory procedures. The mild clinical manifestations and the necessity for caution are stressed.

Many instances of supposed influenza with prolonged convalescence could be due to trichiniasis. Laboratory assistance is of value, but does not indicate the clinical severity. Recommendations for control are given.

Discussion by Edward M. Butt, M.D., Los Angeles; Karl F. Meyer, M.D., Hooper Foundation, University of California, San Francisco.

7. *Clinical Management of Goiter*—Mayo H. Soley, M.D., University of California Hospital, San Francisco.

Colloid goiters can be largely eliminated by the use of iodine in endemic areas. Nontoxic nodular goiters, toxic nodular goiters, and the majority of toxic diffuse goiters should be subtotally removed. Mortality can be reduced by preoperative preparation of all patients with toxic goiters. From 30 to 40 per cent of patients with toxic diffuse goiters can be successfully treated with x-ray.

Discussion by Leon Goldman, M.D., San Francisco; Evelyn Anderson, M.D., San Francisco.

8. *Chairman's Address*—Edwin L. Bruck, M.D., 384 Post Street, San Francisco.

9. *The Identification of Fungi Causing Disease in California*—Robert A. Stewart, M.D., University of California Hospital, San Francisco.

Two general types of procedures are employed in the identification of fungi: descriptive morphology and physiological activity as seen in culture solutions. Difficulty arises when the attempt is made to correlate the results obtained by one method with that of the other. Resolution is possible by the use of chemically defined culture solutions.

Discussion by H. E. Miller, M.D., San Francisco; N. N. Epstein, M.D., San Francisco.

10. *Dermatomyositis: Report of Case Associated with Rheumatic Heart Disease*—Frederick Kellogg, M.D., 211 Cherry Avenue, Long Beach; Felix Cunha, M.D., 450 Sutter Street, San Francisco.

A case of dermatomyositis following smallpox vaccination and associated with rheumatic heart disease is presented. The clinical aspects and various forms of therapy are outlined. Particular emphasis is laid on the prevention of deformity during acute stages and on physiotherapy in rehabilitation.

The paper is supplemented by slides of photographs, microphotographs, and roentgenograms.

Discussion by William J. Kerr, M.D., San Francisco; Irwin C. Schumacher, M.D., San Francisco.

Business Recess

Business meeting and election of officers.

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Third Meeting—Ballroom**Wednesday, May 11, 8:30 a. m.****SYMPOSIUM ON VITAMINS**

This will be a joint meeting of the Sections on Pediatrics and General Medicine.

The program of this joint meeting is printed under the second meeting of the Pediatrics Section. (See page 21.)

Fourth Meeting—Ballroom**Wednesday, May 11, 1:30 p. m.****SYMPOSIUM ON SHOCK—ACUTE CIRCULATORY FAILURE**

This symposium will be presented by Alfred Blalock, M.D., Professor of Surgery, and Tinsley R. Harrison, M.D., Professor of Medicine, Vanderbilt University School of Medicine, Nashville, Tennessee.

- (a) *Peripheral Circulatory Failure*—Alfred Blalock, M.D.

Peripheral circulatory failure is divided into three types: (1) hematogenic, (2) neurogenic, and (3) vasogenic. The reasons for this division and the etiology of each type are considered. The treatment of the several types varies somewhat, according to the cause. Various forms of treatment will be discussed.

- (b) *Acute Cardiac Failure Simulating Peripheral Circulatory Failure*—Tinsley R. Harrison, M.D.

Acute cardiac failure is of three types: (1) Sudden death due either to ventricular fibrillations, or cardiac standstill; (2) cardiac syncope, usually brought about by sudden slowing of the rate; and (3) acute cardiac collapse due either to acute myocardial injury, to severe tachycardia, or to sudden mechanical hindrance to the action of the heart. The treatment of these several conditions varies according to the cause. A brief discussion of each of the different causes and of the proper treatment will be given.

Discussion by William Dock, M.D., Professor of Pathology, Stanford Medical School, San Francisco.

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Fifth Meeting—Ballroom**Thursday, May 12, 9:00 a. m.**

11. *Routine Pulmonary Radiography of Prison Entrants*—George C. Lowell, M.D., Medical Department, California State Prison, San Quentin.

All prisoners, on entrance to San Quentin, have a radiograph of the chest taken. The series of two thousand entrants shows the radiological evidence of tuberculosis in some form in about ten per cent of all cases, active tuberculosis being found in about one per cent of all cases. Methods of treatment are outlined and unusual cases cited.

Discussion by Howard Ruggles, M.D., San Francisco; Cabot Brown, M.D., San Francisco.

12. *Tuberculosis in San Quentin State Prison*—Leo L. Stanley, M.D., Medical Department, California State Prison, San Quentin.

Here are presented excerpts from the biennial medical reports of San Quentin Prison since its establishment in 1851. Accompanying is a graph showing increase in prison population, peaks of incidence of tuberculosis, and death rate. Mortality decreased from seventeen per thousand in 1887 to two per thousand in 1937.

Discussion by Howard Ruggles, M.D., San Francisco; Cabot Brown, M.D., San Francisco.

13. *Geriatrics*—Leonard J. Brunie, M.D., 60 South Grand, Pasadena.

This paper introduces a study in longevity, and is a careful analysis of the heredity, habits, medical history, and clinical findings of those fortunate ones who are found active and in good health in the ninth decade of their lives. This is a preliminary study which it is hoped will stimulate interest in that rapidly developing new science, geriatrics.

Discussion by Robert E. Ramsay, M.D., Pasadena; Franklyn R. Nuzum, M.D., Santa Barbara.

14. *Renal Function in the Aged*—L. Dale Huffman, M.D., 6305 Yucca Street, Hollywood.

Modern methods of testing renal function should be applied in the examination of persons of advanced age. The reliability and prognostic significance of the findings resulting from such tests are analyzed. Needed caution in the interpretation of them is discussed.

Discussion by Donald J. Frick, M.D., Los Angeles; Roland G. Cummings, M.D., Los Angeles.

15. *Clinical Evaluation of the Use of Adrenal Cortex in Treating Childhood Asthma*—F. M. Pottenger, Jr., M.D., 1930 Wilshire Boulevard, Los Angeles.

This paper deals with the continued use of the adrenal cortex, mineralized diet, and associated therapy, reported before this Association in 1935. The results discussed will deal with those patients who have been under observation for a period of one or more years. Certain findings in these cases will be discussed and particular reference will be laid on the regimen followed in their treatment.

Discussion by E. Kost Shelton, M.D., Los Angeles; Leland Hunnicutt, M.D., Pasadena.



II

GENERAL SURGERY SECTION*

HARLAN SHOEMAKER, M.D., *Chairman*
1930 Wilshire Boulevard, Los Angeles

NELSON J. HOWARD, M.D., *Secretary*
2957 Divisadero Street, San Francisco

RAY B. MCCARTY, M.D., *Assistant Secretary*
3616 Main Street, Riverside

First Meeting—Crystal Room

Monday, May 9, 1:30 p. m.

16. *Torsion of the Omentum*—Phillip J. Lipsett, M.D., 400 Twenty-ninth Street, Oakland.

A review of the literature, particularly the series of cases by Corner and Pinches, and that of Morris. A detailed discussion of the etiology and diagnosis of the condition. The differential diagnosis from acute appendicitis, with which it is most frequently confused, is stressed. Two additional cases are reported in detail. An analysis of eighteen cases from the literature, not previously included in other studies, and a plea for more careful observation in this condition to help in the diagnosis and greater knowledge of etiological factors.

Discussion by Thomas F. Mullen, M.D., San Francisco; George Rhodes, M.D., San Francisco.

17. *Acute Pancreatitis*—Norman C. Paine, M.D., 118 West Wilson Avenue, Glendale.

Six cases of acute pancreatitis observed in one year led the author to study the sixty-four cases with this diagnosis in the files of the Los Angeles General Hospital. Half of these cases occurred in the last year. Recent literature and experimental work have been reviewed. Conclusions suggest standardization of preliminary laboratory procedure and indications for surgery.

Discussion by W. H. Olds, M.D., Los Angeles; Frank MacDonald, M.D., Sacramento.

18. *Auscultation of the Abdomen*—John Homer Woolsey, M.D., Woodland Clinic, Woodland.

Clinical application of auscultation of the abdomen will be discussed, with attention to the cause for the absence or increase of peristalsis; report of observation in various clinical conditions and in the post-operative course; and interpretation of the same.

Discussion by Charles Sturgeon, M.D., Los Angeles; Frank Wiebe, M.D., Salinas.

19. *Problems in Diagnosis of Acute Appendicitis*—Thomas O. Burger, M.D., and Harold C. Torbert, M.D., 2120 Fourth Avenue, San Diego.

Review of 449 cases of acute appendicitis, 26.9 per cent of which were ruptured at time cases were referred to us, with emphasis on diagnostic aspects. Fourteen atypical modes of onset noted, emphasis on which had led practitioner into error. Occurrence of symptoms and findings when appendix is in unusual location discussed.

Discussion by Einar Eiskamp, M.D., Watsonville; Walter A. Bayley, M.D., Los Angeles.

* Monitors: Carleton Mathewson, M.D., San Francisco, and Omer Wheeler, M.D., Riverside.

20. *Actinomycosis in Association with Appendicitis and Ruptured Viscus*—W. Wallace Greene, M.D., and Carleton Mathewson, Jr., M.D., San Francisco Hospital, San Francisco.

A review of the mode of infection, clinical picture, and pathology of actinomycosis following acute suppurative appendicitis and ruptured viscus; presentation of cases and recommendations for treatment.

Discussion by Leon Goldman, M.D., San Francisco; Thomas A. Card, M.D., Riverside.



Second Meeting—Crystal Room

Tuesday, May 10, 8:30 a.m.

21. *Address by Chairman*—Harlan Shoemaker, M.D., 1930 Wilshire Boulevard, Los Angeles.

22. *Regional Anesthesia in the Acute Abdomen*—E. C. Moore, M.D., 511 South Bonnie Brae Street, Los Angeles.

Less shock to patients; less manipulation; less spreading of infection and much less mortality thereby.

Discussion by Verne C. Hunt, M.D., Los Angeles; Whitfield Crane, M.D., Oakland.

23. *Anomalies of the Colon*—W. H. Brownfield, M.D., 2007 Wilshire Boulevard, Los Angeles.

Cause symptoms of other visceral pathological changes. A plea for generous incision and thorough exploration. The commonly called chronic appendix is usually but a part in the process of cecal "immobilization." Extension of the linea terminalis may be responsible for condition of frequently called fixed sigmoid colon. The incidence of diverticulosis and diverticulitis. The various herniations are not discussed.

Discussion by John C. Schmoel, M.D., Los Angeles; Caleb Stone, M.D., Santa Barbara.

24. *The Problem of Multiple Polyposis of the Colon*—Robert Scarborough, M.D., Stanford Hospital, Clay and Webster Streets, San Francisco.

Multiple polyposis of the colon, either hereditary ("primary diffuse polyposis") or secondary to an inflammatory process in the colon ("pseudopolyposis") presents a critical problem to the surgeon. Eradication of all polyps is essential to prevent almost inevitable malignant degeneration. To this end radical surgery alone has been shown to be effective. Three successful cases of excision of the entire colon and rectum are described.

Discussion by William Daniel, M.D., Los Angeles; Fred Foote, M.D., San Francisco.

25. *Colectomy, Complete*—Alanson Weeks, M.D., and G. D. Delprat, M.D., Fitzhugh Building, San Francisco.

Experience with three patients. Three patients are presented in which a complete colectomy is performed. The first for pseudopolyposis, and ulceration of the colon. The other two cases for ulceration, fistula formation, and marked toxemia.

Discussion by A. C. Reed, M.D., San Francisco; Malcolm Hill, M.D., Los Angeles.

26. *Obstruction Following Gastro-enterostomy or Subtotal Resection of the Stomach—A New and Simple Operation for Its Relief*—Carl L. Hoag, M.D., 384 Post Street, San Francisco, and John B. deC. M. Saunders, F.R.C.S. (Ed.), University of California Hospital, San Francisco (by invitation).

Early obstruction following gastro-enterostomy or subtotal resection of the stomach occurs in a comparatively small percentage of cases, but when it does happen it is a serious and frequently fatal condition. If the obstruction persists after seven to ten days of conservative treatment or occurs late in the period of convalescence, it is usually mechanical in character so that an emergency operation becomes imperative, with a resulting mortality of approximately 75 per cent.

The authors have devised a jejunoplasty, based upon the principles of the Finney pyloroplasty, which

requires a minimum of surgery and gives the same excellent relief. This jejunoplasty is of value not only in relieving the acute obstruction, but it permits visual inspection of the stoma and may be used in chronic cases as an approach, (1) for cauterization or excision of a marginal or jejunal ulcer; (2) to increase the size of the gastric stoma if it is too small; and (3) to completely close the gastric stoma in those cases where restoration of the original continuity of the gut is desired.

Report of cases. Illustration by lantern slides and charts. Report of animal experimentation. Exhibit of museum specimens.

Business Recess

Business meeting and election of officers.

✽

Third Meeting—Crystal Room

Wednesday, May 11, 8:30 a. m.

27. *The Surgical Importance of Papaverin Hydrochlorid*—Donald C. Collins, M.D., 1930 Wilshire Boulevard, Los Angeles.

The alkaloid papaverin should be in the armamentarium of every surgeon. The administration of this drug intravenously has saved over 90 per cent of individuals with recent severe massive postoperative pulmonary embolism. The intra-arterial injection has obviated the necessity of an embolectomy in 84 per cent of those suffering from emboli of the peripheral circulation.

Discussion by Donald A. Charnock, M.D., Los Angeles; Stanley H. Mentzer, M.D., San Francisco.

28. *Muscle Grafts in Surgery of Heart and Lung*—Brodie Stephens, M.D., and Harry Benteen, M.D. (by invitation), 384 Post Street, San Francisco.

Fourteen dogs have had bilateral ligation (in stages) of both the right and left coronary arteries. The pectoral muscle has been employed as a graft in an effort to provide an adequate blood supply to the heart in the animals so treated. These animals have now been observed fourteen to eighteen months. A report of the fate of these grafts amplified with injection preparations will be presented. In humans, muscle grafts have also been used in the closure of lung abscess cavities. The fate of these grafts, too, will be demonstrated by both gross and histologic demonstrations.

Discussion by Paul C. Sampson, M.D., Oakland; Albert H. Elliott, Jr., M.D., Santa Barbara.

29. *Transpleural Repair of Traumatic Diaphragmatic Hernia*—H. E. Schiffbauer, M.D., 1005 Brockman Building, Los Angeles.

A report of six cases, with slides and motion pictures in color.

With the increase in injuries from automobile accidents, the incident of traumatic rupture of the diaphragm has increased, and is more often diagnosed. Routine roentgenological examination of the chest is often not sufficient to make the diagnosis. Treatment consists of a reposition of the viscera, repair of hernia by abdominal or transpleural route.

Discussion by Emile Holman, M.D., San Francisco; Clarence G. Toland, M.D., Los Angeles.

30. *Report of Follow-up and Evaluation of the Injection Treatment of Hernia*—Franklin I. Harris, M.D., 450 Sutter Street, San Francisco, and A. S. White, M.D., 516 Sutter Street, San Francisco.

This follow-up study is by request of the chairman of the 1937 Del Monte meeting; a continuation of the report rendered the Society at the 1937 meeting concerning the cases presented at the 1936 meeting in Coronado.

Open to discussion from the floor.

31. *Venereal Lymphogranuloma in California*—Carleton Mathewson, Jr., M.D., San Francisco Hospital.

This report was requested by the chairman of the 1937 session held at Del Monte.

Fourth Meeting—Ballroom

Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON SHOCK

This will be a joint meeting of the following sections: Medicine; Surgery; Obstetrics and Gynecology; Eye, Ear, Nose, and Throat; Pathology; Pediatrics.

The program of this joint meeting is printed under the fourth meeting of the General Medicine Section. (See page 12.)

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Fifth Meeting—Crystal Room

Thursday, May 12, 9:00 a. m.

32. *Burn Contractures of the Hand: Their Prevention and Correction by Means of Skin Grafting*—Harry Blackfield, M.D., 350 Post Street, San Francisco.

A detailed discussion of the types of skin grafts used for hand-surface reconstruction following burns is included in this paper. Lantern slides will be shown, illustrating progressive stages of the grafting in early and late cases, and the results achieved.

Discussion by William Kiskadden, M.D., Los Angeles; Gerald B. O'Connor, M.D., San Francisco.

33. *Nerve Grafts*—Sterling Bunnell, M.D., and Joseph H. Boyes, M.D., 516 Sutter Street, San Francisco.

A note of skepticism pervades the literature concerning nerve grafts which is not warranted by clinical experiences based upon thirty-one cases. The indications for the use of nerve grafts are considered, and regeneration through both undegenerated and degenerated free nerve grafts in experimental animals is shown by photomicrographs. The end-results of thirty-one cases of free nerve grafts in humans are shown graphically on lantern slides.

Discussion by Carl Rand, M.D., Los Angeles; Edmund J. Morrissey, M.D., San Francisco.

34. *Spontaneous Hematoma Occurring in the Rectus Muscle*—H. Glenn Bell, M.D., and Harry Benteen, M.D. (by invitation), University of California Hospital, San Francisco.

The recognition, diagnosis, and treatment of this condition are discussed and a report of cases is given. An etiological classification is offered.

Discussion by Ray B. McCarty, M.D., Riverside, and Edgar L. Gilcreest, M.D., San Francisco.

35. *The Treatment of Cancer of the Lip*—Report of 160 cases from 1932 to 1937, inclusive—George Stevenson Sharp, M.D., 605 Professional Building, Pasadena.

One hundred and sixty cancers of the lip with positive pathological reports are discussed. The treatment of the primary growth is performed advantageously by radiation or surgery or both according to the clinical and microscopical type of cancer. The secondary or metastatic growth in the neck is treated by radical surgery. The clinical types of lip cancer, the procedures of treatment and results are demonstrated by lantern slides.

Discussion by Alson R. Kilgore, M.D., San Francisco, and George D. Brown, M.D., Pomona.

36. *Benign Tumors of Female Breasts*—Franklyn D. Hankins, M.D., 3616 Main Street, Riverside.

The normal anatomy and physiology of the female breast will be briefly reviewed. Alterations of the normal physiology will be discussed in relation to the production of the various pathologic states, namely, (1) mazoplasia, (a) fibro-adenoma; (2) cystic disease; (3) papilloma; (4) Schimmelbusch's disease. The symptoms, diagnosis, and treatment and their relation to malignant tumors will be described.

Discussion by Edward M. Butt, M.D., Los Angeles; Nelson J. Howard, M.D., San Francisco.

III

OBSTETRICS AND GYNECOLOGY
SECTION*

R. GLENN CRAIG, M.D., *Chairman*
Medico-Dental Building
490 Post Street, San Francisco

GEORGE W. COON, M.D., *Vice-Chairman*
3770 Twelfth Street, Riverside

JOHN N. EWER, M.D., *Secretary*
411 Thirtieth Street, Oakland

First Meeting—Tap Room
Monday, May 9, 1:30 p. m.

37. *Squamous Cell Epithelioma of the Vulva*—Edward J. Kilfoy, M.D., 1930 Wilshire Boulevard, Los Angeles.

This paper consists of a review of the literature, anatomy, pathology, the diagnosis, the differential diagnosis, and surgical treatment. The value of x-ray and radium therapy. The radical surgical procedure to be carried out, with an analysis of fifty cases, as regards age incidence, degree of malignancy, type of treatments used, and the prognosis as regards longevity. Illustrated by lantern slides.

Discussion by James Percy, M.D., Los Angeles.

38. *The Use of Sulphanilamid in Lower Genital Tract Gonorrhea*—Arnold Manor, M.D., 2355 California Street, San Francisco.

This paper concerns briefly the use of sulphanilamid in the treatment of gonorrhea in the Women's Out-Patient Clinic at Stanford University Hospital, and the results obtained.

Discussion by Norman H. Williams, M.D., Los Angeles.

39. *The Use of Sulphanilamid in Upper Genital Tract Gonorrhea*—Raymond E. Gillett, M.D., (by invitation), 2635 Twenty-Third Street, San Francisco.

Discussion of dosage; clinical therapeutic results obtained with sulphanilamid in (a) initial acute salpingo-oophoritis, (b) recurrent acute salpingo-oophoritis, and (c) acute parametritis; the value of this drug in the treatment of cervicitis; toxic complications during medication; deductions.

Discussion by Henry N. Shaw, M.D., Los Angeles; Roy E. Fallas, M.D., Los Angeles; and Norman H. Williams, M.D., Los Angeles.

40. *Gonorrheal Vulvovaginitis in Childhood*—Woodburn K. Lamb, M.D., 2490 Channing Way, Berkeley.

This study presents a series of twenty-three patients studied at the University of Michigan Hospital, with vulvovaginitis of gonorrheal etiology. The physiology concerned in this disease entity is discussed, and slides to demonstrate the changes are presented. Treatment in the twenty-three cases consisted of estrogenic hormone (Theelin) given intramuscularly. In all the cases studied, a positive urethral and vaginal smear was found. The potentialities of the urethra as a focus of reinfection discussed, and the need for careful study stressed.

Discussion by Bernard J. Hanley, M.D., Los Angeles.

41. *Renal Changes Following Toxemias of Late Pregnancy*—Ernest W. Page, M.D., 2560 Bancroft Way, Berkeley, and Alvin J. Cox, M.D., 1905 Laguna Avenue, San Francisco.

A study based on the histologic findings of kidneys from women who have had toxemias of late pregnancy, compared with those from women who have had pregnancies, but no evidence of toxemia. The results are interpreted with the aid of clinical follow-up studies on ninety cases of eclampsia.

Discussion by Lyle G. McNeile, M.D., Los Angeles, and Dwight L. Wilbur, M.D., San Francisco.

Second Meeting—Tap Room

Wednesday, May 11, 8:30 a. m.

42. *Varicose Veins in Pregnancy*—A. M. McCausland, M.D., 3780 Wilshire Boulevard, Los Angeles.

This paper is a preliminary report of the history, treatment, and follow-up examinations of 150 pregnant women, whose varicose veins were cared for at the Los Angeles Maternity Service. Special attention will be given to the treatment of vulvar varicosities. A very short review of the literature on this subject will be included. Slides will be used in presenting the material and in demonstrating the technique used.

Discussion by Nelson J. Howard, M.D., San Francisco.

43. *Induction of Labor*—William Benbow Thompson, M.D., 803 Wilshire Medical Building, Los Angeles.

Within the past few years there have appeared numerous enthusiastic publications advocating induction of labor by means of rupture of membranes accompanied by preliminary castor oil and quinin medication and usually followed by Intranasal Pituitary Extract. As should have been expected, the procedure has been adopted by many with insufficient experience in obstetrics in general and, as a consequence, often the results have been highly unsatisfactory for both mother and child. In general, the failure in induction has occurred because the condition of the cervix has not been recognized. In other instances an unfavorable position of the infant has resulted disastrously. A review of the patients upon whom induction has been performed, gathered from two of the local hospitals, and, in addition, a questionnaire covering the experience of the members of the Pacific Coast Obstetrical Society, forms the basis of this study.

Discussion by Donald Tollefson, M.D., Los Angeles.

44. *Chairman's Address: The Specialty of Gynecology*—R. Glenn Craig, M.D., 490 Post Street, San Francisco.

The scope of gynecology. Its development. A consideration of the anthropological, psychological, and endocrinological characteristics of the female. The importance of these in the selection, application and evaluation of surgical procedures.

45. *The Relation of Estrogenic and Gonadotropic Hormones to Climacteric Symptoms*—Kathleen M. Murphy, M.D., 516 Sutter Street, San Francisco, and C. F. Fluhmann, M.D., Stanford University Hospital, San Francisco.

The recent literature tends to attribute the subjective symptoms of the climacteric to either the loss of ovarian secretion or increase of anterior pituitary hormone. The present study is an analysis of the hormone content of the blood of climacteric women before and after the menopause, and its relation to the patients' symptoms.

Discussion by John C. Irwin, M.D., Los Angeles.

46. *Roentgen-Ray Therapy for Uterine Cancer*—Daniel G. Morton, M.D., University of California Hospital, San Francisco.

An effort is made to assay the value of high voltage roentgen-ray therapy for uterine cancer as reflected by the results obtained during the last six years at the University of California Hospital on cases in which deep roentgen-ray therapy was used. Survival curves are compared with those obtained in comparable cases not so treated. The morbidity and mortality of roentgen radiation is discussed.

Discussion by Robert Stone, M.D., San Francisco.

Business Recess

Business meeting and election of officers.

* Monitors: Dwight D. Young, M.D., Los Angeles, and James V. Campbell, M.D., Oakland.

Third Meeting—Ballroom
Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON SHOCK

This will be a joint meeting of the following sections: Medicine; Surgery; Obstetrics and Gynecology; Eye, Ear, Nose and Throat; Pathology; Pediatrics.

The program of this joint meeting is printed under the fourth meeting of the General Medicine Section. (See page 12.)



IV

EYE, EAR, NOSE, AND THROAT SECTION*

FRANK BAXTER, M.D., *Chairman*
 1624 Franklin Street, Oakland

DEWEY R. POWELL, M.D., *Vice-Chairman*
 Medico-Dental Building, Stockton

CLIFFORD W. WALKER, M.D., *Secretary*
 427 West Seventh Street, Los Angeles

First Meeting—Cottage "A"
Monday, May 9, 1:30 p. m.

47. *The Equipment of the Modern Oculist's Office*—George Hosford, M.D., 450 Sutter Building, San Francisco.

Relation of economic pressure to present-day trends in medical and surgical practice. Methods of meeting conditions which are developing. Organization of an ophthalmological office. Climatic considerations and location of building. Floor plans and routing of patients. Waiting rooms, treatment rooms, operating room, homatropin room, field room, refraction charts and equipment, slitlamps, control of illumination.

Discussion by Clifford W. Walker, M.D., Los Angeles; Samuel Durr, M.D., San Diego.

48. *The Surgical Management of Otogenous Brain Abscess*—Leo J. Adelstein, M.D., 1930 Wilshire Boulevard, Los Angeles.

The surgical management of otogenous brain abscess includes: (1) The exact diagnosis and localization by neurologic study. (2) An optimum period of observation to allow the infectious process to thoroughly encapsulate. (3) Surgical drainage by the simplest possible method and adequately maintained for at least six weeks or longer. The method of drainage by choice is the one that permits adequate and prolonged drainage with the least amount of post-operative interference on the part of the operator.

Discussion by George H. Patterson, M.D., Los Angeles; Simon Jesberg, M.D., Los Angeles.

49. *Progressive Essential Atrophy of Iris—A Summary of All Reported Cases*—Etta C. Jeancon, M.D., 523 West Sixth Street, Los Angeles.

Progress of a case which has been under observation for six years. All reported cases (about thirty), compared and studied with especial regard to their final outcome, most of which ended in blindness in the affected eye.

Discussion by Hans Barkan, M.D., San Francisco; George Landegger, M.D., Los Angeles.

50. *The Prognosis in Sarcoma of the Uveal Tract*—M. N. Beigelman, M.D., 1930 Wilshire Boulevard, Los Angeles.

The relative incidence of recurrence and metastases in various clinical stages of the disease. The

* Monitors: Dewey Powell, M.D., Stockton, and Rodman Irvine, Los Angeles.

prognostic value of histologic structure in cases of uveal sarcoma, based on (1) the presence or absence of pigment; (2) the type of cells; (3) the distribution of reticular fibers. Statistical illustrations.

Discussion by Hans Barkan, M.D., San Francisco; H. G. Merrill, M.D., San Diego.



Second Meeting—Cottage "A"
Tuesday, May 10, 8:30 a. m.

51. *The Endonasal Tear Sac Operation*—Ben L. Bryant, M.D., 2007 Wilshire Boulevard, Los Angeles.

The various surgical procedures which have been used in the past for the treatment of chronic dacryocystitis are considered, and their respective advantages and disadvantages evaluated. A modified endonasal operation is described, with emphasis placed on those factors which are of greatest influence on the final result, stress being placed on the physiology of the region. The results of a series of cases treated by this method are presented.

Discussion by George P. Landegger, M.D., Los Angeles; John P. Lordan, M.D., Los Angeles.

52. *Exfoliation of the Lens Capsule: Frequency of Occurrence and Significance*—Rodman Irvine, M.D., 700 Roosevelt Building, Los Angeles.

Two hundred and thirty-five cataract patients seen consecutively at the Government Eye Hospital at Madras, India, were examined for exfoliation of the lens capsule. The condition was found in eight per cent of the cases. Of those with exfoliation, 50 per cent had chronic glaucoma. Twenty cases seen in this country were followed and showed an incidence of glaucoma of 75 per cent. The prognosis for these cases is less favorable than for other cataract cases, generally speaking. The relation of senile exfoliation of the lens capsule to zonular lamellar separation, as seen in heat cataract, is discussed with an attempt to explain the etiology of exfoliation.

Discussion by Clinton Wilson, M.D., and George Landegger, M.D.

- 52a. *Treatment of Sinusitis by the Displacement Method*—Lawrence K. Gundrum, M.D., 1930 Wilshire Boulevard, Los Angeles.

Report of eight hundred cases using ephedrin, neosynephrin, antigen, and foreign proteins.

The cases reported in this paper comprise a study conducted during the past ten years. The discussion is limited to chronic sinusitis. Eight hundred cases are presented with symptoms, findings and results, with treatments. The displacement treatment was used in all cases. One hundred and eighty treated, using ephedrin or neosynephrin in normal saline; twenty using autogenous bacterial antigen; five hundred using stock antigens; and one hundred with foreign proteins (broth media). The results were most favorable when stock antigens were used.

Discussion by Herman Semenov, M.D., Los Angeles, and Mathew N. Hosmer, M.D., San Francisco.

Business Recess

Business meeting and election of officers.



Third Meeting—Ballroom
Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON SHOCK

This will be a joint meeting of the following sections: Medicine; Surgery; Obstetrics and Gynecology; Eye, Ear, Nose and Throat; Pathology; Pediatrics.

The program of this joint meeting is printed under the fourth meeting of the General Medicine Section. (See page 12.)

V

ANESTHESIOLOGY SECTION*

WILLIAM LE ROY GARTH, M.D., *Chairman*
1252 Third Avenue, San Diego

JOHN G. DUNLOP, M.D., *Secretary*
168 So. Kingsley Drive, Los Angeles

First Meeting—Cottage "F"

Monday, May 9, 1:30 p. m.

53. *Chairman's Address: Anesthesia in Europe*—William L. Garth, M.D., 1252 Third Avenue, San Diego.

54. *Present Status of Inhalation Anesthesia for Tonsillectomy with Special Technique when Pulmonary or Renal Complications Exist*—R. G. Henderson, M.D., 1101 Security Building, Long Beach.

Inhalation anesthesia for tonsillectomy is a procedure which requires careful technique and involves much responsibility. Preoperative medication is discussed together with routine methods of anesthesia, using gas and ether vapor. Pulmonary and kidney complications contraindicate the use of ether, and endotracheal cyclopropane is recommended as a desirable alternative method.

Discussion by C. E. Harner, M.D., Long Beach; W. W. Hutchinson, M.D., Los Angeles.

55. *On Respiration*—Arthur E. Guedel, M.D., 1633 Wellington Road, Los Angeles.

Stimulus threshold a variable factor. Response to stimulus depends upon relationship between stimulus and threshold. Anesthetic respiration affords easiest illustration.

Discussion by Clinton Thienes, M.D., Los Angeles.

56. *Experimental Basis for the Use of Stimulants*—Clinton H. Thienes, M.D., 3551 University Avenue, Los Angeles.

Analeptics are drugs that antagonize a state of depression. Drugs may arouse a comatose patient, or simply increase respirations or stimulate the vasomotor centers. The principal drugs of this sort are caffeine, theophyllin, strychnin, metrazol, picrotoxin, coramin, lobelin, and benzedrin. Peripherally acting drugs are the digitaloid glucosides and the sympathomimetic amines. The experimental basis for the clinical use of these drugs will be discussed.

Discussion by Albert J. Wineland, M.D., Los Angeles, and Myron Prinzmetal, M.D., Los Angeles (by invitation).

57. *The Desirability of a Selective Anesthetic Program*—Hall G. Holder, M.D., 233 A Street, San Diego.

Knowledge of the recent advances in anesthesia afford the surgeon considerable choice in selecting the anesthetic best suited for the surgical problem at hand. This choice must also take into consideration physical and emotional handicaps. This paper will discuss these and related problems.

Discussion by George D. Huff, M.D., San Diego; Edwin H. Kelley, M.D., San Diego.

Business Recess

Business meeting and election of officers.



Second Meeting—Ballroom

Wednesday, May 11, 1:30 p. m.

Section unites with other Sections for symposium on "Shock" in main ballroom. (See page 12.)

* Monitors: Madeline Manuel, M.D., Pasadena; J. G. Dunlop, M.D., Los Angeles.

VI

DERMATOLOGY AND SYPHILOLOGY SECTION*

STANLEY O. CHAMBERS, M.D., *Chairman*
Roosevelt Building
727 West Seventh Street, Los Angeles

NELSON PAUL ANDERSON, M.D., *Secretary*
904 Westlake Professional Building
2007 Wilshire Boulevard, Los Angeles

ARNE E. INGELS, M.D., *Assistant Secretary*
Medico-Dental Building
490 Post Street, San Francisco

First Meeting—Cottage "B"

Monday, May 9, 1:30 p. m.

58. *Chairman's Address*—Stanley O. Chambers, M.D., 727 West Seventh Street, Los Angeles.

59. *Lymphoblastomas*—Udo J. Wile, M.D., Professor of Dermatology and Syphilology, University of Michigan, Ann Arbor, Michigan. (By invitation.)

This paper will treat of the lymphoblastomas as they involve the skin. The various dermatologic manifestations of the leukemias, Hodgkin's disease, and mycosis fungoides will be discussed. The relationship of these diseases to each other will be considered. Illustrated by lantern slides.

Discussion by Howard Morrow, M.D., San Francisco; Samuel Ayres, Jr., M.D., Los Angeles.

60. *Signs of Malignancy in Melanomas*—Clement E. Counter, M.D., 206 Professional Building, Long Beach.

This paper will deal with a large group of melanomas of the skin studied histopathologically with special reference to the signs of malignancy, particularly early malignant changes. Illustrated by photomicrographs.

Discussion by Nelson Paul Anderson, M.D., Los Angeles; John W. Budd, M.D., Los Angeles.

61. *Use of Strontium Bromid in Acute Urticaria*—Hiram D. Newton, M.D., 1203 Bank of America Building, San Diego.

This paper consists of a review of the use of strontium bromid in itching dermatoses, with specific reference to its use in acute urticaria and angioneurotic edema. S. Schubert, in 1929, reported eighteen such cases with phenomenal results by the intravenous use of strontium bromid. This report consists of about twenty cases of acute urticaria, urticarial serum reaction and angioneurotic edema treated by the intravenous injection of strontium bromid. An analysis of the results obtained and a discussion of the indications and contra-indication for the use of strontium bromid is included.

Discussion by William H. Goeckermann, M.D., Los Angeles; Laurence Taussig, M.D., San Francisco.

62. *The Uses of Sulfanilamid in Dermatology*—Franklin I. Ball, M.D., 6253 Hollywood Boulevard, Hollywood.

This paper will be a review of the employment of the drug as a therapeutic agent in such dermatoses as erysipelas, streptococcal lymphangitis and cellulitis, and chronic infectious eczematoid dermatitis. This paper will be illustrated with lantern slides in natural color.

Discussion by Arne E. Ingels, M.D., San Francisco; George Koetter, M.D., Los Angeles.

63. *Scabies: Its Treatment with Benzoyl Benzoate as Compared with Sodium Thiosulphate and HCl*—Arne E. Ingels, M.D., 490 Post Street, San Francisco.

A series of about sixty cases treated with benzoyl benzoate, saponollis and alcohol, on two consecutive days, will be reported, mentioning untoward reactions and advantages; this, compared with an equal number of cases treated with sodium thio-

* Monitors: Thomas W. Nisbet, M.D., Pasadena, and Anker K. Jensen, M.D., Los Angeles.

sulphate and HCl. A short reference to other anti-scabetics will also be presented.

Discussion by Harry J. Templeton, M. D., Oakland; Thomas W. Nisbet, M. D., Pasadena.

64. *Pruritus Ani*—Charles R. Caskey, M. D., 1930 Wilshire Boulevard, Los Angeles.

This paper will discuss the subject from a dermatological aspect. Proctological, urological, and constitutional causative factors will be enumerated but left for discussion to specialists in these fields. Local etiological factors will be discussed, followed by pathology and treatment. Personal clinical deductions will be given with little reference to the literature.

Discussion by Philip K. Allen, M. D., San Diego; William H. Daniels, M. D., Los Angeles.

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Second Meeting—Cottage "B"

Tuesday, May 10, 8:30 a. m.

65. *Mapharsen Tolerance in Neoarsphenamin-Sensitive Patients: Analysis of One Hundred Cases*—Katherine H. MacEachern, M. D., 1200 North State Street, Los Angeles. (By invitation.)

This paper is a study of reactions to mapharsen in the treatment of syphilis in patients who previously showed intolerance to neoarsphenamin. Formerly the treatment of such patients was limited to the heavy metals. A certain percentage of these arsphenamin-sensitive patients are able to tolerate mapharsen.

Discussion by Hiram E. Miller, M. D., San Francisco; Frederick G. Novy, Jr., M. D., Oakland.

66. *Studies in Tissue Concentration of Bismuth*—Julius R. Scholtz, M. D., and Albert Cheney, Ph. D. (by invitation), 1930 Wilshire Boulevard, Los Angeles.

This study represents an attempt to show the concentration levels of bismuth which are attained when bismuth is administered in therapeutic doses to human syphilitic subjects. The data presented is from careful chemical analyses of the vital organs of persons who, while under routine bismuth therapy for syphilis, suffered sudden death from other causes. Included are two cases in which the cause of death was acute renal failure due to bismuth nephrosis. None of the other cases showed any clinical evidence of bismuth toxicity. Reports are given on twelve cases; this exceeds by far the total of all cases previously reported in the literature.

Discussion by Clinton Thienes, M. D., Los Angeles; Edward M. Butt, M. D., Los Angeles.

67. *The Absorption and Elimination of Bismuth Following Its Oral Administration to Rabbits*—Ernest K. Stratton, M. D., 490 Post Street, San Francisco.

In a comparative study several oral bismuth preparations were given to rabbits; the bismuth content of the feces and urine was determined following the administration of single doses as well as after multiple daily doses.

Discussion by Udo J. Wile, M. D., Ann Arbor, Michigan; Julius R. Scholtz, M. D., Los Angeles.

68. *The Treatment of Active Interstitial Keratitis in Prenatal Syphilis*—C. Russell Anderson, M. D., 1930 Wilshire Boulevard, Los Angeles.

The treatment of interstitial keratitis by chemotherapy alone is usually disappointing. Means were sought by which quiescence of the process could be brought about, thereby reducing opacities and scarring of the cornea to a minimum. During the past two years, all patients seen in the Los Angeles General Hospital, and all private patients, have been given a course of malaria fever with gratifying results. In some, in which age was a contraindication, typhoid vaccine intravenously was used. The cases are reviewed, and the conclusion is that at the present time malaria is the method of choice in treating active interstitial keratitis.

Discussion by Udo J. Wile, M. D., Ann Arbor, Michigan; Harold F. Whalman, M. D., Los Angeles.

69. *The Ninth-Day Erythema Following Arsphenamin Therapy*—Norman N. Epstein, M. D., and Edward A. Levin, M. D., 450 Sutter Street, San Francisco.

The ninth-day erythema due to arsphenamin therapy is of considerable practical importance in anti-syphilitic therapy. Five cases showing this reaction are reported. A discussion, with a review of the literature upon this subject, is presented.

Discussion by Maxwell J. Wolff, M. D., Los Angeles; C. J. Lunsford, M. D., Oakland.

70. *The Nonspecific Provocative Wassermann Reaction*—Charles W. Barnett, M. D., George V. Kulchar, M. D., and Richard B. Jones, M. D., Stanford University Medical School, San Francisco.

In a study of the provocative Wassermann reaction in syphilitic and nonsyphilitic patients, similar effects were noted. The clinical and experimental aspects of the provocative reaction are dealt with, special emphasis being placed on its lack of specificity.

Discussion by Stuart Way, M. D., San Francisco; H. Sutherland Campbell, M. D., Los Angeles.

Business Recess

Business meeting and election of officers.



VII

INDUSTRIAL MEDICINE AND SURGERY SECTION*

FREDERIC C. BOST, M. D., *Chairman*
384 Post Street, San Francisco

HARVEY G. McNEIL, M. D., *Vice-Chairman*
523 West Sixth Street, Los Angeles

GEORGE H. SANDERSON, M. D., *Secretary*
242 North Sutter Street, Stockton

First Meeting—Cottage "D"

Monday, May 9, 1:30 p. m.

71. *Chairman's Address: The Importance of the Emergency Treatment of Compound Fractures*—Frederic C. Bost, M. D., 384 Post Street, San Francisco.

72. *Announcements Regarding Statistical Data on Industrial Accident Practice in the State of California*—Morton R. Gibbons, M. D., 350 Post Street, San Francisco.

73. *Neuropathic Joints: A Study of Their Development, with Particular Emphasis on the Causative Role of Trauma. Suggestions for Conservative and Radical Orthopedic Treatment*—Ralph Soto-Hall, M. D., 350 Post Street, San Francisco, and Keene O. Halderman, M. D., 350 Post Street, San Francisco.

A group of neuro-arthropathies (Charcot joints) have been studied to determine their manner of development and their relation to trauma. Emphasis has been placed on the very early changes when the diagnostic problems are difficult. In addition to suggestions for conservative treatment, a method of arthrodesis of neuropathic joints, not previously reported, is described. This operation is performed in two stages, the first of which makes the sclerotic bone more viable by revascularization through multiple drilling, which procedure is followed by the arthrodesing operation.

Discussion by Ernst Freund, M. D., Los Angeles; Donald McNeil, M. D., Sacramento.

Business Recess

Business meeting and election of officers.

* Monitors: Mosser Taylor, M. D., Los Angeles, and William Arthur Clark, M. D., Pasadena.

74. *Traumatic Appendicitis*—George K. Rhodes, M.D., 490 Post Street, San Francisco.

Traumatic appendicitis is a diagnosis infrequently made but, nevertheless, one over which there is much controversy. Many claim awards have been made on the basis of such a diagnosis. This subject will be reviewed and the author's personal experience with several cases summarized.

Discussion by Wayland Morrison, M.D., Los Angeles; R. A. Jewett, M.D., Los Angeles.

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Second Meeting—Cottage "C"

Tuesday, May 10, 8:30 a. m.

This will be a joint meeting of the Section on Radiology and the Section on Industrial Medicine and Surgery.

The program of this joint meeting is printed under the first meeting of the Radiology Section. (See page 22.)

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Third Meeting—Crystal Room

Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON NUCLEUS PULPOSUS RUPTURE AND ITS RELATION TO INJURY

75. *Neurosurgical Aspects*—Howard Brown, M.D., 384 Post Street, San Francisco.

A consideration of the anatomy; clinical history and findings. Diagnoses by lipiodol studies. Use of intraspinal air as a diagnostic measure. Operative findings and results.

76. *Orthopedic Aspects, Including the Question of Spinal Fusion Following Laminectomy*—Frederick Linde, M.D., 490 Post Street, San Francisco.

The following is a short résumé indicating the salient points in my paper on spinal fusion following laminectomy: (1) Orthopedic aspects of symptoms referable to dislocated intervertebral discs; (2) The desirability of a spinal fusion following complete laminectomy; (3) Technique of operation; (4) Postoperative care and results.

77. *X-ray Aspects*—Kenneth S. Davis, M.D., 2131 Ocean View Boulevard, Los Angeles.

The recognition by Mixter, Barr, and Ayres that protrusions of the intervertebral discs were identical with the lesions described by Schmorl has stimulated great interest in this condition. The roentgenographic signs may be classified as direct and indirect. The direct signs (narrowing to the intervertebral space, hypertrophic lipping, etc.), while suggestive, do not justify one in making a positive diagnosis. The indirect signs are obtained either by air myelography or by the use of lipiodol. Lipiodol should only be used in carefully selected cases after a thorough clinical investigation by one competent in doing neurological examination. It should never be used without a preliminary Queckenstedt test, and an examination of the spinal fluid.

78. *The Viewpoint of the Insurance Carrier and Claims Attorney*—Edmund D. Leonard, Esq., Attorney, San Francisco. (By invitation.)

79. *The Present Attitude of the Industrial Accident Commission*—Ross Harbaugh, M.D., 350 Post Street, San Francisco.

Discussion by Carl Rand, M.D., Los Angeles; J. M. Robinson, M.D., San Francisco.

A discussion of cases which have come before the Industrial Accident Commission with diagnosis, treatment, and degree of disability resulting.

VIII

NEUROPSYCHIATRY SECTION*

FRED O. BUTLER, M.D., *Chairman*
Sonoma State Home, Eldridge

JOHN B. DOYLE, M.D., *Secretary*
1930 Wilshire Boulevard, Los Angeles

First Meeting—Tap Room

Tuesday, May 10, 8:30 a. m.

80. *Chairman's Address: The Importance of a State-Wide Program on Mental Hygiene in California*—F. O. Butler, M.D., Sonoma State Home, Eldridge.

While much has been done on general preventive medicine in the State and country, comparatively little has been done on a broad scale along mental lines. A very definite program should be set up in California, especially on account of the big influx of all types of mental cases, which thus far the State has been unable to control.

81. *Geriatric Psychiatry—A Review of Some of the Psychiatric Problems of Senescence*—Charles Lewis Allen, M.D., 214 South Lafayette Park Place, Los Angeles.

Increase in the number of old people being brought to our Psychopathic Hospital. The cause of this increase. The nature of senescence and its physical basis. An outline of the chief psychopathic manifestations observed in our material. What can be included under the subject of psychoses of senescence? Their etiology, pathology, diagnosis, and classifications. Their prognosis and treatment. Complication of this latter problem by the California laws. Medico-legal considerations with regard to the senile psychoses.

Discussion by Paul A. Gliebe, M.D., San Francisco; Verne R. Mason, M.D., Los Angeles.

82. *Insulin Shock Therapy in Dementia Praecox: A Report of a Series of Cases*—Clifford W. Mack, M.D., Livermore Sanitarium, Livermore.

Introduction. Selection of cases. Legal complications. Points to be discussed with the family concerning the dangers and possibilities of treatment. Methods of treatment used. Number of cases. Brief case reports giving duration, symptoms, degree of mental impairment and results of treatment. Conclusion and analysis of results. Psychiatric lessons to be learned from this method of treatment.

Discussion by J. M. Nielson, M.D., Los Angeles; G. S. Johnson, M.D., San Francisco.

83. *Suicide*—F. G. Lindemulder, M.D., 2001 Fourth Avenue, San Diego, and F. E. Toomey, M.D., 233 A Street, San Diego.

It is an established fact that San Diego has the highest suicide mortality in the Western Hemisphere. This study includes research into probable causes of suicide from psychiatric, sociologic, and meteorologic standpoints. An attempt to classify the cases, separately and collectively, to gain more insight into the causation of suicide in this particular location is made.

Discussion by A. J. Rosanoff, M.D., and Glenn E. Myers, M.D., Los Angeles.

84. *An Analysis of the Classification "Epileptic Psychosis"*—Eugene Ziskind, M.D., and Esther Somerfeld-Ziskind, M.D., 2007 Wilshire Boulevard, Los Angeles.

The different types of psychotic reaction seen in epileptics are examined. The point is raised that epilepsy is a symptom or syndrome. The validity of making a major classification of the psychoses dependent on a symptom is questioned. Many epileptic psychoses are identical with psychoses caused by known etiologic agents. Only in the absence of a

* Monitors: Karl O. von Hagen, M.D., Los Angeles, and Cullen W. Irish, M.D., Los Angeles.

known etiologic factor is the condition referred to as an epileptic psychosis. The bearing of repeated convulsions on the possible production of a psychosis is discussed.

Discussion by G. S. Johnson, M.D., San Francisco; William Edler, M.D., Pasadena.

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Second Meeting—Cottage "B"

Wednesday, May 11, 1:30 p. m.

85. *Sympathectomy in Angina Pectoris*—R. B. Raney M.D., 727 West Seventh Street, Los Angeles.

A discussion of the cause of symptoms in angina pectoris, with especial attention to their relationship to the autonomic nervous system. The psychologic action of therapeutic drugs is taken up, as well as experimental work on the sympathetic nerve supply to the coronary vessels. An attempt is made to establish a basis for rational surgical therapy. A new operation is described. Five patients have been operated by this method; all obtained complete relief. One of the five gave definite electrocardiographic evidence of coronary disease.

Discussion by D. G. Dickerson, M.D., Los Angeles; Carl W. Rand, M.D., Los Angeles.

86. *Traumatic Intracerebral Hemorrhage: Its Relationship to Delayed Traumatic Apoplexy*—C. B. Courville, M.D., 312 North Boyle Avenue, Los Angeles.

Intracerebral hemorrhage following injury to the head is not uncommon. Judging from its anatomic location, it is probably a contrecoup lesion. On the basis of pathologic evidence, it is doubtful whether the so-called delayed traumatic apoplexy has any etiologic relationship to craniocerebral injury.

Discussion by H. W. Flemming, M.D., San Francisco; R. B. Raney, M.D., Los Angeles.

87. *Contributory Factors in Vascular Encephalopathy*—C. W. Irish, M.D., 1930 Wilshire Boulevard, Los Angeles.

In addition to a general discussion a number of photographs of illustrative lesions, photographs in color of injected specimens and photographs of roentgenologic studies of the cerebral supply will be demonstrated.

Discussion by A. G. Foord, M.D., Pasadena; W. N. Anderson, M.D., Los Angeles.

88. *Relation of the Childhood Infections to Behavior*—Arthur R. Timme, M.D., 1930 Wilshire Boulevard, Los Angeles.

Many behavior difficulties encountered in children have their root in what appears to be a mild encephalitis during the course of one of the infectious diseases. The prototype of this sort of behavior is seen in behavior changes in children following epidemic encephalitis, though usually to a greater degree. The grouping of symptoms is typical enough to be called a syndrome. Central nervous, vegetative nervous and endocrine symptoms are the rule. Localization in the hypothalamic region and basal ganglia is indicated.

Discussion by F. N. Anderson, M.D., Los Angeles; S. J. Glass, M.D., Los Angeles.

89. *Unilateral Cerebral Dominance: A Consideration of Some of Its Manifestations*—Karl O. von Hagen, M.D., 727 West Seventh Street, Los Angeles.

The different parts of the brain are discussed with regard to laterality of function. The degree of unilateral cerebral dominance varies for different functions and in different individuals. For some functions it is complete; for others only relative; while for others no dominance is evident. Recent advances of knowledge on the subject.

Discussion by F. G. Lindemulder, M.D., San Diego; S. D. Ingham, M.D., Los Angeles.

Business Recess

Business meeting and election of officers.

IX

PATHOLOGY AND BACTERIOLOGY SECTION*

GERTRUDE MOORE, M.D., *Chairman*
2404 Broadway, Oakland

GEORGE D. MANER, M.D., *Secretary*
657 South Westlake Boulevard, Los Angeles

PAUL H. GUTTMAN, M.D., *Assistant Secretary*
1127 Eleventh Street, Sacramento

First Meeting—Cottage "E"

Monday, May 9, 1:30 p. m.

90. *Chairman's Address*—Gertrude Moore, M.D., 2404 Broadway, Oakland.

91. *Bilateral Carcinoma of the Breast, with an Interesting Familial History*—David A. Wood, M.D., Stanford University School of Medicine, San Francisco; E. L. Rixford, M.D., 1795 California Street, San Francisco; and H. H. Darling, M.D., 909 Hyde Street, San Francisco.

This is the report of a typical cancer family in which most of the members of three generations have either succumbed to cancer or are suffering with it at the present time. On both sides of the family tree bilateral carcinoma of the breast has appeared.

92. *Some Bacteriological Studies in Sulphanilamid Therapy*—Paul Michael, M.D., 434 Thirtieth Street, Oakland.

This paper confines itself to a review of the pertinent literature only. The biochemical and physiological reactions of sulphanilamid and its allied substances are discussed. Bacteriological studies *in vivo* and *in vitro* reported, with particular reference to the gonococcus, staphylococcus and streptococcus groups. Rationale of improved method of therapy discussed.

93. *Intracranial Vascular Anomalies—Pathology of Certain Congenital and Acquired Lesions of Intracranial Blood Vessels*—Newton Evans, M.D., 2000 Milan, South Pasadena, and Cyril B. Courville, M.D., 312 South Boyle Avenue, Los Angeles.

In an autopsy series of approximately twenty thousand, a large number of these vascular anomalies have been encountered. These include aneurysms of the circle of Willis and its branches, varices of the dural sinuses, angiomas, angioblastomas, etc. These are discussed from the standpoint of pathogenesis, morphology and effects.

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Second Meeting—Cottage "D"

Tuesday, May 10, 8:30 a. m.

94. *Aplastic Anemia: Some Little-Stressed Aspects*—Theodore S. Kimball, M.D., 217 North Central Avenue, Glendale; and Sydney N. Soll, M.D. (by invitation), 2423 Grand Street, Huntington Park.

Aplastic anemia has been usually thought of as a condition in which the severe leukopenia, anemia, and thrombopenia present are the result of a completely aplastic bone marrow. In a series of cases recently autopsied at the Los Angeles County Hospital studies have revealed that the above clinical findings may result from bone marrow which still contains many regenerating cells.

95. *Morphology of Epithelioblastoma*—John W. Budd, Jr., M.D., 2131 West Third Street, Los Angeles.

In an analysis of salivary gland tumors the wide variety of tumor patterns was found to be due to variations in (1) degree in direction of differentiation of the epithelial cells; (2) polarity of secretion; (3) nature of secreted material.

Other forms of epithelial neoplasms are similarly analyzed.

* Monitors: T. S. Kimball, M.D., Los Angeles, and E. M. Butt, M.D., Los Angeles.

96. *Report of an Epidemic of Gastro-enteritis in Infants*—E. M. Butt, M.D., 3551 University Avenue, Los Angeles; and John F. Kessell, Ph.D. (by invitation), University of Southern California School of Medicine, Los Angeles.

This paper will include a summary of the case histories, the necropsy findings, and a report of the bacteriological studies in a series of four cases of gastro-enteritis together with pneumonia in infants. These infants simultaneously contracted the infection during their first few days of life in a local maternity hospital. The epidemic subsided as abruptly as it began and no further cases developed. *Pseudomonas aeruginosa* was recovered from all four cases. The evaluation of these findings will be discussed in detail in the paper.

97. *Tuberculosis of Animal Origin*—Emil Bogen, M.D., Olive View Sanatorium, San Fernando.

Nearly two thousand reported instances of bovine type tubercle bacillus infection in man emphasize the importance of transmission from animals. An instance of pulmonary tuberculosis of bovine origin discovered at Olive View illustrates this danger. Tuberculosis of animal origin should be eradicated.

98. *Theca Cell Tumors of the Ovary*—A. G. Foord, M.D., 749 Fairmont Avenue, Pasadena.

A report of two cases of theca cell tumors will be given, with discussion of the cases in the literature, aggregating about seventeen at the present time. For years these cases have been classed as ovarian fibromas or some other term. The similarity of the clinical manifestations to those of granulosa cell tumors and the embryologic and histologic diagnostic features will be discussed.

Business Recess

Business meeting and election of officers.



Third Meeting—Ballroom

Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON SHOCK

This will be a joint meeting of the following sections: Medicine; Surgery; Obstetrics and Gynecology; Eye, Ear, Nose and Throat; Pathology; Pediatrics.

The program of this joint meeting is printed under the fourth meeting of the General Medicine Section. (See page 12.)



X

PEDIATRICS SECTION*

E. EARL MOODY, M.D., *Chairman*
829 So. Alvarado Street, Los Angeles

HARTZELL H. RAY, M.D., *Secretary*
23 Second Avenue, San Mateo

W. W. BELFORD, M.D., *Assistant Secretary*
601 Medico-Dental Building, San Diego

First Meeting—Cottage "C"

Monday, May 9, 1:30 p. m.

99. *The Preventorium Child*—Harold G. Trimble, M.D., 508 Sixteenth Street, Oakland.

Our concept of childhood tuberculosis has changed materially since 1920. During this time many structures have been erected for the care of children who were presumably pretuberculous. There is but little need in many areas for these structures for the purpose for which they were originally intended. Such institutions can be used

not only as educational centers, but also in specific cases in helping solve physical and psychological problems in individual children other than tuberculosis, as well as providing care for a limited time for a few selected cases of known T.B. contacts.

Discussion by Chesley Bush, M.D., Livermore; Clifford Sweet, M.D., Oakland; W. A. Hodges, M.D., Pasadena.

100. *Treatment of Meningococcic Meningitis*—Paul M. Hamilton, M.D., 248 East Main Street, Alhambra; William J. Mitchell, M.D. (by invitation), 1200 North State Street, Los Angeles, and Albert G. Bower, M.D., 136 No. Central Avenue, Glendale.

A review of 120 cases treated at the Los Angeles County General Hospital during the past two years, with results of treatment with serum, antitoxin, sulfanilamid, and combinations of these agents.

Discussion by Philip E. Rothman, M.D., Los Angeles; Edward B. Shaw, M.D., San Francisco.

101. *Intestinal Obstruction in Children*—W. J. Norris, M.D., 1136 West Sixth Street, Los Angeles.

This paper is based upon the findings in one hundred cases of different types of intestinal obstruction in children who were admitted to the Children's Hospital of Los Angeles. A résumé of the various types will be given with pictures and remarks.

Discussion by Henry Hunt Searls, M.D., San Francisco.

102. *Pyuria in the New-Born*—William M. Happ, M.D., 3875 Wilshire Boulevard, Los Angeles.

Pyuria or so-called pyelitis occurs in new-born babies, but the condition is seldom recognized because urine examinations are not done. The symptoms are fever and digestive upsets. It occurs in boys as often as in girls. The condition is frequently secondary to some congenital obstruction in the urinary tract. These obstructions are outlined in the paper. Illustrative cases presented.

Discussion by Elmer A. Belt, M.D., Los Angeles.

103. *Report of the Committee on Immunization Procedure*—Edward B. Shaw, M.D., 384 Post Street, San Francisco. (Committee report.)

The Committee on Immunization Procedures will submit a brief report detailing its recommendations regarding the use of the various procedures, some of which it is felt should be done routinely, some for special considerations and some not at all. There will be included a brief discussion of recommended methods for the performance of these procedures.

Committee members: Edward B. Shaw, M.D., Chairman, San Francisco; Paul M. Hamilton, M.D., Alhambra; Henry E. Stafford, M.D., Oakland.

Business Recess

Business meeting and election of officers.



Second Meeting—Ballroom

Wednesday, May 11, 8:30 a. m.

SYMPOSIUM ON VITAMINS

Joint meeting with Section on Medicine.

104. *Present Knowledge of Vitamins*—Nina Simmonds, Sc.D., University of California, San Francisco. (By invitation.)

During the past thirty years research in nutrition has yielded a large amount of detailed information regarding the essentials of an adequate diet. An understanding of the dietary properties of foods and the demonstration of the existence of the vitamins were made possible only by animal experimentation. The practical application of this research data to the physician will be the theme of the paper.

Discussion by William Palmer Lucas, M.D., San Francisco.

* Monitors: Ralph Netzeley, M.D., Pasadena, and William Riley, M.D., San Francisco.

105. *Studies of the Blood Plasma—Vitamin C in Childhood*—James F. Rinehart, M.D., University of California Medical School, San Francisco.

This report is based upon the analysis of a large series of blood vitamin C determinations in childhood, both in health and disease. The reliability, usefulness and limitations of the method are considered, as is evidence pertaining to the possible influence of C deficiency in certain diseases.

Discussion by Roland P. Seitz, M.D., San Francisco.

106. *Studies on Hypoglycemia in Infants and Children*—Alexis F. Hartmann, M.D., Professor of Pediatrics, Washington University School of Medicine, St. Louis, Missouri. (By invitation.)

An outline will be presented of the various ways in which the hypoglycemia state may be produced, and observations on normal newly born infants, those born of diabetic mothers, and those with intracranial or adrenal hemorrhage, together with observations on the group of children with severe recurrent attacks of hypoglycemia, will be stressed.

107. *Diagnosis and Treatment of Vitamin Deficiency States*—Dwight L. Wilbur, M.D., 490 Post Street, San Francisco. (By invitation.)

In this presentation is discussed the diagnosis of vitamin deficiency states. These conditions most commonly consist of mild pathological and physiological changes, and the diagnosis depends on the recognition of the clinical features of these deficiencies and on the interpretation of certain so-called diagnostic tests available for vitamins A, C, and D.

Discussion by Stacy R. Mettier, M.D., San Francisco; William C. Boeck, M.D., Los Angeles.



Third Meeting—Ballroom

Wednesday, May 11, 1:30 p. m.

SYMPOSIUM ON SHOCK

This will be a joint meeting of the following sections: Medicine; Surgery, Obstetrics and Gynecology; Eye, Ear, Nose and Throat; Pathology; Pediatrics.

The program of this joint meeting is printed under the fourth meeting of the General Medicine Section. (See page 12.)



XI

RADIOLOGY SECTION*

JOHN D. LAWSON, M.D., *Chairman*
California State Life Building
Sacramento

KARL M. BONOFF, M.D., *Secretary*
1930 Wilshire Boulevard
Los Angeles

First Meeting—Cottage "C"

Tuesday, May 10, 8:30 a. m.

Joint meeting with Section of Industrial Medicine and Surgery.

108. *Normal Angles in the Bones About Various Joints and Reporting in Degrees the Deviations from the Normal*—R. G. Van Nuys, M.D., 2490 Channing Way, Berkeley.

A presentation of normal bone angles about certain joints. An effort has been made to find a standard for measuring deviations from normal.

* Monitors: E. W. Liljedahl, M.D., Los Angeles, and J. F. Chapman, M.D., Pasadena.

and reporting the same in degrees and centimeters. Special attention is given to the central axis of weight bearing and its relation to the astragalus. The salient angles of the os calcis are of great importance. Wrist, elbow and hip angles are dealt with. Knee joint spaces have been measured and recorded. The paper will be given by aid of slides.

Discussion by Harold E. Crowe, M.D., Los Angeles.

109. *X-ray Evidence of Healing of Fractures of the Femoral Neck*—H. A. Hill, M.D., and L. H. Garland, M.D., 450 Sutter Street, San Francisco.

The question has been frequently asked: "What percentage of fractures of the neck of the femur in elderly persons unite by bone?" The answer, up to recent years, was usually "very few." However, since the introduction of various mechanical immobilizing devices, an increasing percentage of fractured femoral necks appear to show bony union. In order to determine the percentage of cases showing x-ray evidence of bony union at varying intervals following fractures, the present study was undertaken. A comparison of the clinical and roentgenological evaluations of union will be outlined, and the roentgenological results to date in the series of cases studied will be presented.

Discussion by K. S. Davis, M.D., Los Angeles.

110. *The Measurement of the Deformity of Alignment in Fractures*—Clayton R. Johnson, M.D., Murphy Memorial Hospital, Whittier.

A method for exact measurement of the deformity of alignment is proposed, especially for those deformities which may affect the function of adjacent joints. The normal angulation of various joint surfaces is given along with the characteristic deformities which often occur with fracture.

Discussion by J. S. Woolford, M.D., Eureka.

111. *End Result Study on Fractured Hips Treated at the San Francisco City and County Hospital*—Wilbur J. Cox, M.D., 450 Sutter Street, San Francisco.

This is a study of fifty fractures of the neck of the femur in which the Smith-Peterson nail was used as a method of internal fixation.

Discussion by John Wilson, M.D., Los Angeles; G. J. McChesney, M.D., San Francisco.

112. *Experiences with the Smith-Peterson Nail*—William Arthur Clark, M.D., 65 North Madison Avenue, Pasadena.

The author has used the Smith-Peterson pin since 1930, by the open reduction method exclusively. Accurate reduction is essential before fixation. Failures have been due to atrophy of the head and to having the pin too high in the spongy trochanter. A short history of metal fixation for fractures of the hip will be given.

Discussion by E. W. Cleary, San Francisco; Frazer Macpherson, M.D., San Diego.

Business Recess

Medical Economics meeting.



Second Meeting—Cottage "D"

Wednesday, May 11, 8:30 a. m.

113. *Chairman's Address*—John D. Lawson, M.D., California State Life Building, Sacramento.

114. *The Roentgenologic Demonstration of Gall Bladder Tumors*—J. D. Coate, Peralta Hospital, Oakland.

Six cases will be included in this report, with complete pathologic studies on three proven cases. This series included both the papillomata and the adenomata.

Discussion by Sumner Everingham, M.D., Oakland; Paul Michael, M.D., Oakland.

115. *The Roentgen Diagnosis of Diseases of the Ileocecal Region of the Gastro-intestinal Tract*—Joseph Jellen, M.D., Department of Radiology, Queen of Angels Hospital, Los Angeles.

There are a large number of diseases which show a special predilection for involvement of the ileocecal region of the gastro-intestinal tract. A classification of these diseases is presented, with a discussion of the roentgen diagnosis. A series of lantern slides will be shown illustrating the roentgen appearance of various diseases mentioned.

Discussion by Irving S. Ingber, M.D., San Francisco; C. M. Richards, M.D., San Jose.

116. *Marked Subperiosteal Calcification in Early Scurvy*—Carl D. Benninghoven, M.D., Mills Memorial Hospital, San Mateo.

Three cases which show the course from early onset to complete healing.

Discussion by James F. Rinehart, M.D., San Francisco; Carl Bowen, M.D., Oakland.

117. *Pulmonary Miliary Lesions*—Ray Carter, M.D., 1200 North State Street, Los Angeles.

Diseases producing them, factors influencing their visibility on the film and the roentgen differentiation diagnosis.

Discussion by M. J. Geyman, M.D., Santa Barbara; M. L. Pindell, M.D., Los Angeles.

Business Recess

Business meeting and election of officers.

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Third Meeting—Cottage "D"

Wednesday, May 11, 1:30 p. m.

118. *Operation of a Multiple Portal Supervoltage X-ray Tube*—A. H. Warner, Ph.D., 1407 South Hope Street, Los Angeles. (By invitation.)

The mechanical and electrical features of a 600,000-volt installation are described. The radiation has been studied and depth dose curves and absorption curves in lead and aluminum are given.

Discussion by Robert S. Stone, M.D., San Francisco.

119. *What Can One Expect from Radiation Therapy in Cancer of the Rectum and Anus*—Orville N. Mealand, M.D., 1407 South Hope Street, Los Angeles.

Carcinoma of the rectum offers great obstacles to its successful treatment by radiation alone. This is due to its situation and its radioresistance, so that the results are largely palliative. Carcinoma of the anus, on the other hand, is accessible, and is often successfully treated by radiation alone.

Discussion by G. S. Sharp, M.D., Pasadena; Clyde Emery, M.D., Los Angeles.

120. *X-ray in Treatment of Carcinoma of the Breast*—Lyll C. Kinney, M.D., 1831 Fourth Street, San Diego.

Except in the early localized cases, the newer methods of fractional radiation combined with surgery will practically double the present curability. Newer radiation methods make it possible to restrict the field of operability, as radical surgery offers little palliation in advanced cases. Radiation with or without simple mastectomy offers real palliation and will prolong life. The paper will discuss indications for x-ray treatment and the present conception of what is adequate radiation in carcinoma of the breast.

Discussion by Alson R. Kilgore, M.D., San Francisco.

121. *Use of Radiation Therapy in Acute and Chronic Inflammatory Conditions*—Henry Johnson Ullmann, M.D., 1520 Chapala Street, Santa Barbara.

The discussion includes all inflammatory processes other than dermatoses, malignant and pre-malignant lesions.

Discussion by William H. Sargent, M.D., Oakland.

XII

UROLOGY SECTION*

LLOYD E. KINDALL, M.D., *Chairman*
400 Twenty-ninth Street, Oakland

CARL F. RUSCHE, M.D., *Secretary*
1680 North Vine Street, Hollywood

First Meeting—Cottage "A"

Wednesday, May 11, 8:30 a. m.

122. *Congenital Solitary Kidney—Report of Two Cases*—Frederick A. Bennetts, M.D., 1921 Wilshire Boulevard, Los Angeles.

One, occurring in an infant seven months of age with hydrourter and hydronephrosis. Another, in a girl seventeen years of age, complicated by hydronephrosis secondary to congenital adhesions and anomalous blood vessels about upper ureter and lower pole of kidney, producing acute Dietl's crisis and anuria.

Discussion by Carl Rusche, M.D., Hollywood; Edward Beach, M.D., Sacramento.

123. *The Cure of Gonorrhea: An Immunologic Problem*—Edward W. Beach, M.D., Medical Dental Building, Sacramento.

Gonorrhea is concededly a self-limiting disease. Stated differently, the cure of gonorrhea is contingent to and predicated upon the development of complete tissue immunity. A much better understanding of this immunologic mechanism must be contrived before the advent of more efficient treatment and more intelligent application. To this end, modern concepts anent this autogenetic phenomena are briefly reviewed herein. An attempt is likewise made to evaluate the newer forms of therapy (particularly chemotherapy and induced fever) in terms of immunologic accomplishments as applied to the problem of cure.

Discussion by Arno Folte, M.D., San Francisco; J. J. Crane, M.D., Los Angeles.

124. *The diagnosis and Treatment of Secondary Anaerobic Infections of Kidney Wounds*—Charles P. Mathé, M.D., 450 Sutter Street, San Francisco.

Report of case presenting secondary anaerobic streptococcal infection of kidney wound following nephropexy and sympathectomy. Elongated non-pus-producing blind sinuses were encountered between abdominal muscular layers. Anaerobic infection diagnosed. Cleared up by local administration, intra and hyperdermic injection of antigen and intramuscular injections of immunized blood. Problem of diagnosis. Treatment. Prognosis and results.

Discussion by Thomas Gibson, M.D., San Francisco; Clark Johnson, M.D., San Francisco.

125. *Suprapubic Bladder Drainage*—Henry A. R. Kreutzmann, M.D., 2000 Van Ness Avenue, San Francisco.

This paper explains in detail the method of inserting the improved suprapubic trocar just above the symphysis pubis into the distended bladder. Its use in cases of acute retention resulting from hypertrophied prostate or impassable urethral stricture is discussed. The advantages of this method over indwelling catheter for drainage preliminary to prostatectomy and the results obtained by this method in seventy cases are discussed in detail. A motion picture illustrates the operation.

Discussion by Paul A. Ferrier, M.D., Pasadena; Albert M. Meads, M.D., Oakland.

126. *Carcinoma of the Prostate*—Frank Hinman, M.D., 603 Fitzhugh Building, San Francisco.

Introduction: Incidence, diagnosis, treatment. Analysis of 191 cases with type of treatment and results. The result in detail of forty-five cases treated by radical operation.

Discussion by Arthur B. Cecil, M.D., Los Angeles; A. Elmer Belt, M.D., Los Angeles.

* Monitors: Donald Charnock, M.D., Los Angeles, and Chester H. Mackay, M.D., Los Angeles.

- 126a. *Experimental Production in Animals of Conditions Similar to Those of the Adrenal Syndrome in Humans*—James B. Hamilton, Ph. D., Yale University School of Medicine, New Haven, Connecticut. (By invitation.)

It has been reported that the presence in the female of adequate amounts of male hormone substance will cause masculinization changes in the clitoris and the homologue of the male prostatic glands and cessation of the female reproductive cycle. If given sufficiently early in the prenatal period, embryological defects result. These and other changes following androgen treatment constitute a condition which corresponds even in some fine details to that which occurs in the adrenal syndrome of humans with tumor or hyperplasia of the adrenal.

127. *Chairman's Address: Conservative Renal Surgery—With Particular Reference to Kidney Trauma*—Lloyd Kindall, M.D., 400 Twenty-ninth Street, Oakland.

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Second Meeting—Cottage "A"

Wednesday, May 11, 1:30 p.m.

128. *Treatment of Vesical Diverticula*—Roger W. Barnes, M.D., and R. Theodore Bergman, M.D., Suite 707, Medico-Dental Building, Los Angeles.

A comprehensive review of the literature is made pertaining to the etiology, pathology, and treatment of vesical diverticula. A conservative method, transurethral diverticulotomy, is also discussed.

Discussion by J. J. Crane, M.D., Los Angeles; A. A. Kutzmann, M.D., Los Angeles.

129. *Diagnosis and Treatment of Urinary Tract Infections*—James R. Dillon, M.D., 490 Post Street, San Francisco.

Two years ago a report was made on urinary tract infections with clear urine. Further studies and observations on diagnostic technique and treatment will be presented under the above title, illustrated by lantern slides.

Discussion by A. J. Scholl, M.D., Los Angeles; A. M. Meads, M.D., Oakland; Nathan Hale, M.D., Sacramento.

130. *Limitation of Male Sex Hormone Therapy for Benign Hyperthrophy*—Robert V. Day, M.D., 1911 Wilshire Boulevard, and Harry W. Martin, M.D., 6253 Hollywood Boulevard, Los Angeles.

Testosterone itself, and both liposoluble and hydrosoluble testis extracts, are potent in relieving hesitancy, feeble stream and nycturia in Grade 1 and Grade 2 hyperthrophied prostates, and often the residual markedly decreases. It cannot be demonstrated that the prostate is actually decreased in its dimensions. This form of therapy is valuable in certain types of cases where surgery carries too great an element of danger or it seems necessary to

the patient himself to postpone a surgical procedure for economic or other reasons personal to him. Like insulin, the treatment should not be discontinued, but the dose may be diminished in many cases. This form of therapy is not in any sense a substitute for surgical relief of major prostatic obstruction.

Discussion by Miley B. Wesson, M.D., San Francisco; Paul A. Ferrier, M.D., Pasadena.

131. *The Cystoscopic Implantation of Radium Element in Tumors of the Bladder—A New Technique*—Thomas D. Moore, M.D., 899 Madison Avenue, Memphis, Tennessee. (By invitation.)

132. *Causes of Persistent Sinus Following Suprapubic Cystotomy with Reports of Unusual Cases*—Ben D. Massey, M.D., 112 North Madison Avenue, Pasadena.

Persistence or reformation of a suprapubic sinus is usually due to obstruction of the bladder neck. The paper discusses a patient with myeloid leukemia who developed a suprapubic abscess and urinary sinus five years after prostatectomy. This sinus failed to heal in the absence of lower urinary tract obstruction. Necropsy findings are reported and the rôle of infection is discussed as a causal factor in these conditions.

Discussion by Robert V. Day, M.D., Los Angeles; H. C. Bumpus, M.D., Pasadena.

133. *Congenital Renal Anomalies, with Special Reference to Horseshoe Kidney, with Motion Picture*—Carl Rusche, M.D., and Samuel K. Bacon, M.D., 1630 North Vine Street, Hollywood.

The congenital renal anomaly—horseshoe kidney (with motion pictures in color showing the operative technique for calculus disease). This paper briefly reviews renal embryology, the anatomical features, frequency, and clinical aspects of horseshoe kidney. The management of a patient with horseshoe kidney and calculus disease is reported and the operative technique is demonstrated by motion picture in color.

Discussion by William E. Stevens, M.D., San Francisco; B. H. Hager, M.D., Los Angeles.

134. *Believe It or Not*—Wirt B. Dakin, M.D., 802 Pacific Mutual Building, Los Angeles, California.

A collection of reports of such a startling and incredible nature as to immediately attract keen interest and curiosity. Cases with strangely baffling symptoms, startling pathological conditions and such weird operative findings that one would scarcely give them credence unless he saw them with his own eyes. They represent contributions from many of our leading urologists that are a refreshing stimulus to what is bound to become at times a jaded medical appetite. Many amusing incidents are included.

Business Recess

Business meeting and election of officers.

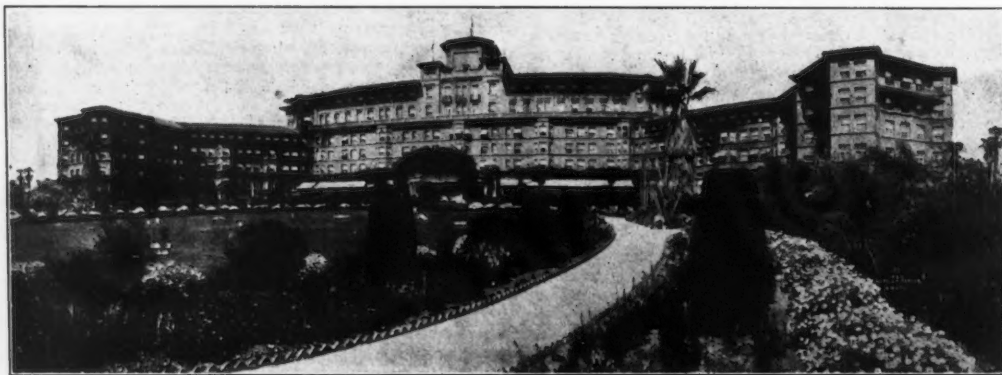


Fig. 1.—Front view of the Huntington Hotel showing a portion of the Horseshoe Gardens.

III—HOUSE OF DELEGATES MEETINGS

35th ANNUAL SESSION—MAIN BALLROOM, HOTEL HUNTINGTON

Speaker, LOWELL S. GOIN, Los Angeles

Vice-Speaker, JOHN H. GRAVES, San Francisco

Secretary, F. C. WARNSHUIS, San Francisco

FIRST MEETING

Monday, May 9, 8 p. m.

Order of Business

1. Call to order.
2. Report of Committee on Credentials.
3. Roll call.
4. Announcement and approval of Reference Committees:
 - (a) Reports of Officers, Standing and Special Committees.
 - (b) Resolutions, Amendments to the Constitution and By-Laws, and New and Miscellaneous Business.
 - (c) Credentials.
 - (d) Report of Council and Secretary-Treasurer.
5. President's address—Howard Morrow.
6. Annual report of the Council—Morton R. Gibbons, Chairman.
7. Report of the Trustees of the California Medical Association—Morton R. Gibbons, President.
8. Report of Auditing Committee—Karl L. Schaupp, Chairman.
9. Report of Secretary-Treasurer—Frederick C. Warnshuis.
10. Report of Editor—George H. Kress.
11. Report of General Counsel—Hartley F. Peart. Mr. Peart will discuss malpractice insurance problems.
12. Report of Committee on Public Relations—Charles A. Dukes, Chairman.
13. Report of Standing and Special Committees:
 - A. Standing Committees:
 - Executive Committee—Karl L. Schaupp.
 - Committee on Associated Societies and Technical Groups—John V. Barrow.
 - Committee on Health and Public Instruction—Fred B. Clarke.
 - Committee on History and Obituaries—Frank R. Makinson.
 - Committee on Hospitals, Dispensaries and Clinics—Daniel Crosby.
 - Committee on Industrial Practice—Morton R. Gibbons.
 - Committee on Medical Defense—George G. Reinle.
 - Committee on Medical Economics—John H. Graves.
 - Committee on Medical Education and Medical Institutions—Loren R. Chandler.
 - Committee on Membership and Organization—E. Vincent Askey.
 - Committee on Postgraduate Activities—John C. Ruddock.
 - Committee on Publications—Ralph Eusden.
 - Committee on Public Policy and Legislation—Junius B. Harris.
 - Committee on Scientific Work—Frederick C. Warnshuis.
 - Committee on Public Relations—Charles A. Dukes.
 - Cancer Commission—Charles A. Dukes.
 - B. Special Committees:
 - Committee on Animal Experimentation—Philip K. Gilman.
 - Committee on Syphilis—Howard Morrow.
 - Committee on a Basic Science Law—George H. Kress.
 - Committee on California Medical Economic Survey—Edward M. Palette.
14. Unfinished Business.
 - A. Amendments to Constitution:
 - Amendment to Constitution, Article VII, Section 1.
 - (d) *Resolution Regarding Nomination and Election of District Councilors*

Resolved, That Section 1 of Article VII of the Constitution of this Association be and hereby is amended as follows, by striking out all of the third paragraph of said Section 1 of Article VII, reading as follows:

"The nine district councilors shall be elected as follows: Prior to the time set for the election of district councilors the delegates of each councilor district for which a councilorship is about to become vacant, shall meet, organize, and in due form elect one or more members of the said councilor district as the nominee or nominees for the said vacancy. Such nomination or nominations shall be submitted in writing, signed by at least two delegates who were present at such meeting, and shall be given to the Secretary-Treasurer, by him to be transmitted to the House of Delegates. The House of Delegates may make additional nominations from the floor of the House, and in the event that the delegates from a councilor district fail to submit a nomination or nominations, shall on its own account proceed to make nominations for each district councilor vacancy. A

vote shall then be taken by the House of Delegates to determine who shall be elected to the vacant councilorship"; and by inserting in lieu thereof the following:

The nine district councilors shall be elected as follows: At least one month prior to the time set for the election of district councilors, the Secretary-Treasurer shall mail a written notice to each delegate, addressed to his address listed in the Association's records, of each councilor district for which a councilorship is about to become vacant, notifying the delegates of the time, which must be at least two weeks after the mailing of the notices, and a place designated by the Secretary-Treasurer, for the nomination meeting of the delegates of said councilor district.

At the time and place designated in said written notice, delegates shall meet, organize and elect by a majority vote a member of the said councilor district as nominee for district councilor for such councilor district for the ensuing term. The delegates shall then transmit in writing to the Secretary-Treasurer the result of such nomination meeting, and the Secretary-Treasurer shall report the same to the House of Delegates. The nominee, regularly nominated by the delegates present at the nomination meeting pursuant to this section, shall be deemed elected by the House of Delegates at the time of the report of the Secretary-Treasurer. In the event that the delegates from a councilor district fail to submit a nomination, the House of Delegates shall, on its own account, proceed to make nominations from the floor of the House, and in such event a vote shall be taken by the House of Delegates to determine which nominee shall be elected to the vacant councilorship.

15. Resolutions and New Business.

(NOTE: All resolutions must be presented in writing and in triplicate.)

16. Approval of Minutes.
17. Recess to Wednesday, 8:00 p. m.

SECOND MEETING

Wednesday, May 11, 8:00 p. m.

Order of Business

1. Call to order.
2. Supplemental Report of Credentials Committee.
3. Roll call.
4. Secretary's announcement of Council's selection of place for the 1939 Annual Session.
5. Elections:
 - (a) President-Elect.
 - (b) Speaker.
 - (c) Vice-Speaker.
 - (d) Councilors:
 - First District—Calvert L. Emmons, Ontario (term expiring).
 - Fourth District—Axcel E. Anderson, Fresno (term expiring).
 - Seventh District—O. D. Hamlin, Oakland (term expiring).
 - (e) Councilors-at-Large:
 - Harry H. Wilson, Los Angeles (term expiring).
 - Morton R. Gibbons, San Francisco (term expiring).
 - (f) Delegates to the American Medical Association—Incumbents:
 - Charles A. Dukes, Oakland (term expiring).
 - Edward M. Palette, Los Angeles (term expiring).
 - Robert A. Peers, Colfax (term expiring).
 - William R. Molony, Sr., Los Angeles (term expiring).
 - (g) Alternate Delegates to the American Medical Association—Incumbents:
 - Edward N. Ewer, Oakland (term expiring).
 - William H. Kiger, Los Angeles (term expiring).
 - F. F. Gundrum, Sacramento (term expiring).
 - John C. Ruddock, Los Angeles (term expiring).
6. Announcement and Approval of Members of Standing Committees Elected by the Council.
7. Report of Reference Committees:
 - (a) Report of Council and Secretary-Treasurer.
 - (b) Reports of Officers, Standing and Special Committees.
 - (c) Resolutions, Amendments, New and Miscellaneous Business.
8. Unfinished Business.
9. Presentation of Officers:
 - President-Elect.
 - Speaker.
 - Vice-Speaker.
10. Presentation of President's Certificate to Howard Morrow.
11. Approval of Minutes.
12. Adjournment.

* Reports of Officers, Standing and Special Committees appear in full text in the Pre-Convention Bulletin, printed as an Appendix to this Annual Session program. (See page 33.)

IV—OTHER MEETINGS

CANCER COMMISSION PATHOLOGY CONFERENCE

Sunday, May 8, 9 a. m. to 4:30 p. m.

359 Science Building, University of Southern California Medical School, Thirty-sixth Place and University Avenue, Los Angeles

The annual Conference on Pathology, sponsored by the California Medical Association, will take place in Room 359 of the Science Building, 3661 University Avenue, corner of Thirty-sixth Place and University Avenue, Los Angeles.

The meeting is being held in this location rather than at the Hotel Huntington because of better lighting facilities, etc. The program will include morning and afternoon sessions. Interesting cases are to be presented for diagnosis, and it is hoped that reports will be made on cases previously presented.

All those who desire to present cases and slides are requested to notify the chairman of the committee, Alvin G. Foord, M.D., 749 Fairmont Avenue, Pasadena, at once. One hundred prepared slides and a copy of the case history, which has to be mimeographed, are likewise to be sent.

If you wish to attend, register with the chairman of the committee or the secretary of the Cancer Commission, 450 Sutter Building, San Francisco, as soon as possible.

Bring your own microscopes. Attendance will be limited.

CANCER COMMISSION RADIOLOGY CONFERENCE

Sunday, May 8, 9:30 a. m. to 4 p. m.

Hotel Huntington, Pasadena

The Radiological Conference, sponsored by the Cancer Commission of the California Medical Association, will be held at the Hotel Huntington, Main Ballroom, on Sunday, May 8, from 9:30 a. m. to 4 p. m.

The discussion will center about radiotherapy, as well as diagnosis.

Those who wish to attend should register with the chairman of the committee, William E. Costolow, M.D., 1407 South Hope Street, Los Angeles, or with the secretary of the Cancer Commission, 450 Sutter Street, San Francisco. Likewise, those who wish to present material for diagnosis or discussion of therapy should contact Doctor Meland as soon as possible.

It is necessary that everyone who wishes to participate should register as attendance will be limited to insure the greatest benefit to those interested.

MEDICAL SOCIETY OF THE STATE OF CALIFORNIA

Wednesday, May 11, 4 p. m., Crystal Room

There will be a meeting of the members of this legal protection organization. Chairman O. D. Hamlin will preside. Reports will be rendered. Officers will be elected. Plans for expansion will be presented. Every member of the California Medical Association is invited, in fact, urged to attend this annual meeting.

V—SCIENTIFIC EXHIBITS

Patio, Hotel Huntington

1. *Heart Association*—Howard F. West, M.D., 1930 Wilshire Boulevard, Los Angeles.

Exhibits and daily demonstrations and moving pictures mornings and afternoons. Watch bulletin board for schedule.

2. *Models of the Prostate as Ascertained by Rectal Palpation*—Roger W. Barnes, M.D., Medico-Dental Building, Los Angeles.

Models of the prostate as ascertained by rectal palpation, demonstrating the normal and eleven different pathological conditions in the prostate. This is to be accompanied by roentgenograms, pathological specimens, and slides of these pathological conditions of the prostate and associated conditions.

3. *Convalescent Serum*—C. M. Hyland, M.D., Children's Hospital Society, 4614 Sunset Boulevard, Los Angeles.

The exhibit of the Children's Hospital convalescent serum includes a demonstration of serum dehydration by the lyophile machine, a motion picture showing the different steps in the pooling and bottling of convalescent serum, various packages of dried and liquid serum as furnished for prophylaxis and treatment, and case charts which show the result of serum therapy.

4. *Tuberculous Tracheobronchitis*—W. R. Oechsli, M.D., Department of Charities, Los Angeles.

An exhibit comprised of the clinical, bronchoscopic, x-ray, and pathological findings in tracheobronchitis occurring as a disease entity as well as a complication of pulmonary tuberculosis, based on over one hundred proved cases. The findings are correlated and presented in the form of charts, x-ray films, diagnosis, and pathological specimens.

5. *Muscle-Splitting Extraperitoneal Lumbar Ganglionectomy*—Felix L. Pearl, M.D., 450 Sutter Street, San Francisco.

This exhibit consists of a colored motion picture depicting the technique of muscle-splitting extraperitoneal lumbar ganglionectomy as developed by

the author. The picture shows the steps of the operation, removal of the sympathetic chain, closure, and the advantages of the method. Ureter, vena cava, aorta, and other retroperitoneal structures are well shown.

6. *Plastic Surgery*—Fred Lindenberg, M.D., 1680 North Vine Street, Hollywood.

Results of reconstructive and cosmetic cases of plastic surgery. Demonstration with life-size masks and unretouched photographs.

7. *Reconstructive Plastic and Oral Surgery*—Arthur E. Smith, M.D., D.D.S., and James B. Johnson, M.D., 1930 Wilshire Boulevard, Los Angeles.

This exhibit consists of numerous life-sized contact models reproduced in natural colors and arranged in series to demonstrate various congenital and acquired deformities and their correction by reconstructive plastic and oral surgery. These include cases of mutilation from automobile accidents, congenital cleft palate and lip, malignancies of the face and oral cavity and many other classical conditions encountered by the surgeon limiting himself to this field.

8. *Diseases of the Thyroid Gland*—Harold L. Thompson, M.D., 1930 Wilshire Boulevard, Los Angeles.

The exhibit will consist of charts, outlines, drawings, and pathological specimens covering diseases of the thyroid gland in a general way.

9. *Manipulative Surgery*—G. Mosser Taylor, M.D., 2007 Wilshire Boulevard, Los Angeles.

Charts showing indications, contraindications, and complications, illustrated by some forty artistic drawings, mounted and well labeled, and grouped under the different joints, such as the neck, low back, so-called "sacro-iliac" lesions, shoulders, elbows, knees, and feet. Besides this, a colored motion picture completes the exhibit. This work has been developed from ten years of clinical practice, and is in keeping with the latest thought, particularly on the subject of low-back pain.

VI—ENTERTAINMENT

Calendar

Sunday Afternoon:

Tea served, Hotel Huntington.

Sunday Night:

First run of moving pictures, Hotel Huntington.

Monday Afternoon:

Trip to moving-picture studio, arranged particularly for Auxiliary, but open to men.

Monday Night:

Musical, Hotel Huntington.

Tuesday, 7:30 a. m.

Past Presidents' breakfast. Past presidents of the Association will hold their annual breakfast. See bulletin board or inquire at registration desk for name of the private dining room assigned for this function.

Tuesday Afternoon:

Trip to Griffith Park Planetarium, arranged particularly for the Auxiliary, but open to men.

Tuesday Night:

President's dinner and entertainment, Hotel Huntington. Reservations must be made with the Hotel Huntington management by noon on Tuesday. (Price, \$2.50 per plate.) Guests of Hotel Huntington obtain special tickets from room clerk.

Golf Clubs

	Fees
Midwick Country Club.....	\$2.00
San Gabriel Country Club.....	1.00
Flintridge Country Club.....	1.50
Altadena Golf Club.....	1.00
Brookside Golf Course.....	1.00
Annandale Country Club.....	2.00

Other Entertainment

Demonstrations of giant x-ray and other electrical equipment has been promised at the California Institute of Technology. Registration at the desk will be necessary in order to provide for accommodations. Definite dates will be set later by the Institute.

Demonstration of astronomical equipment at Mount Wilson Observatory will be possible during afternoons, if sufficient register at the desk. Night observations may be possible, but could not be promised this far in advance by the officials at Mount Wilson.

The Arrangements Committee will be glad to arrange any unofficial trips for individuals or parties who will apply in advance, such as charter boats for deep sea fishing, plane trip to Boulder Dam, or reservations at Catalina Island.

Tickets for admission to the Huntington Library must be applied for well in advance, either through the committee or direct to the Huntington Library. The Gay Lion Farm, the Pasadena Community Playhouse, and Olivera Street in Los Angeles, are other suggested points of interest, as also the Padua Hills Theater and dining room above Claremont.

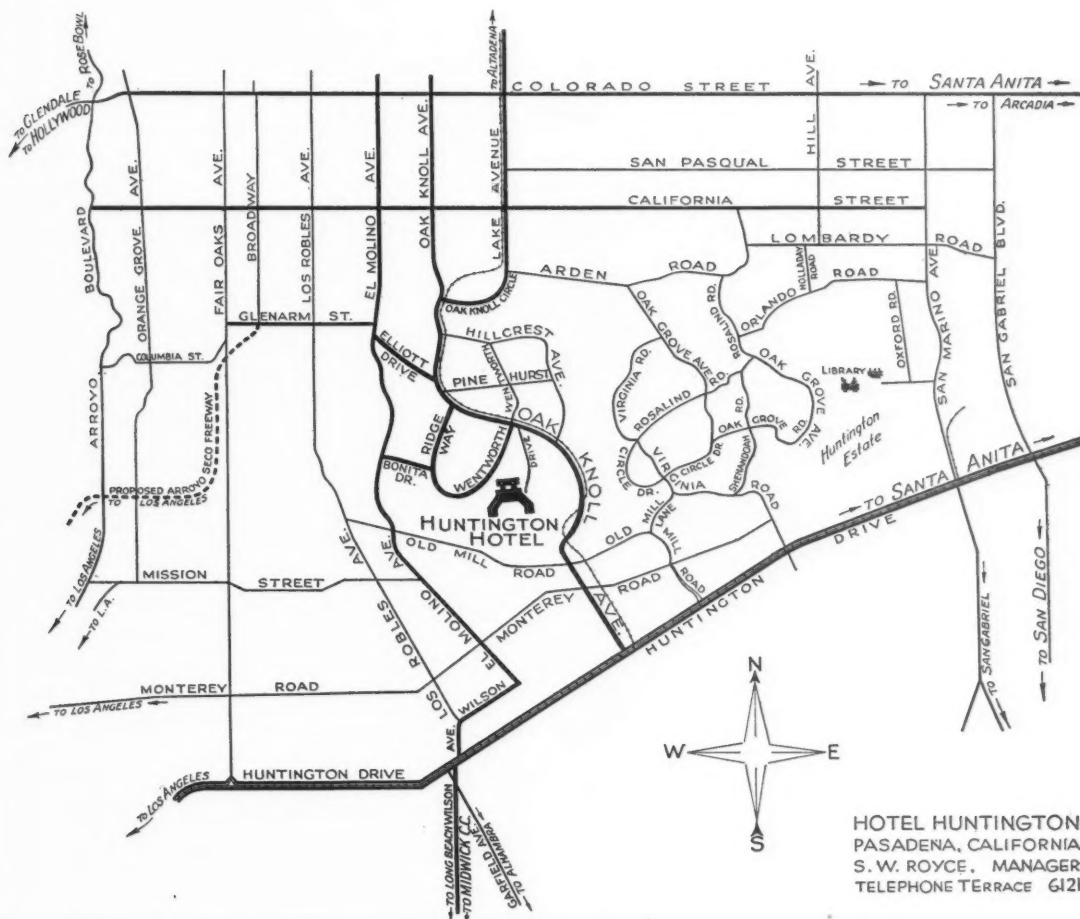


Chart 1.—Showing the location of the Hotel Huntington, the Huntington Library and the Vista del Arroyo Hotel. (Vista del Arroyo Hotel is located at the extreme upper left corner at Arroyo Boulevard and Colorado Street.)



MRS. HOBART ROGERS
*President, Woman's Auxiliary to the
California Medical Association
1937-1938*



MRS. HARRY E. HENDERSON
*Recording Secretary, Woman's Auxiliary to the
California Medical Association
1937-1938*

VII—WOMAN'S AUXILIARY

Ninth Annual Session

WOMAN'S AUXILIARY TO THE CALIFORNIA MEDICAL ASSOCIATION

Headquarters at Hotel Huntington, Pasadena

MRS. HOBART ROGERS, *President*
(1137 Mandana Boulevard, Oakland)

MRS. ARTHUR T. NEWCOMB, *Convention Chairman*
(1 Richmond Place, Pasadena)

Sunday, May 8

- Arrival of delegates, members, and guests, greeted by a delegation of hostesses.
3:00-7:00 p. m.—Registration.
4:00 p. m.—Tea and music, Hotel Huntington lobby.
6:00 p. m.—Informal round-table dinner for Auxiliary members.
8:30 p. m.—Moving pictures, Hotel Huntington Ballroom.

Monday, May 9

- 9:00 a. m. to 7:00 p. m.—Registration.
9:00 a. m.—Pre-Convention State Board meeting, Crystal Room, Hotel Huntington.
10:00 a. m.—Opening session of the California Medical Association. All Auxiliary members are urged to attend.
12:30 p. m.—Informal round-table luncheon.
1:30 p. m.—Trip to Moving Picture Studio. (Subject to change.) (Price, \$3; this includes bus fare and entrance to the studio.)
9:00 p. m.—Musical in honor of Mrs. Howard Morrow, wife of the president of the California Medical Association, with members of the State Board receiving.
10:15 p. m.—Reception. Light refreshments.

Tuesday, May 10

- 9:00 a. m. to 7:00 p. m.—Registration.
9:30 a. m.—First general meeting of the ninth annual convention at *Hotel Vista del Arroyo*, Mrs. Hobart Rogers presiding.
12:15 p. m.—Luncheon, *Hotel Vista del Arroyo*, honoring Mrs. Hobart Rogers, with Mrs. James Fulton Percy presiding. Members of the State Advisory Board will be guests of honor. Dr. Lowell S. Goin of Los Angeles will be the guest speaker. Presentation of the Doane Membership Trophy by Mrs. William Henry Sargent of Oakland. (Price \$1.25, plus tax.)
2:15 p. m.—Optional trips: (1) Visit to the Huntington Library art exhibits and gardens. (2) Planetarium demonstration and lecture at Griffith Park Observa-

tory, stopping en route to view the noted art wonder, "The Lord's Supper," at Forest Lawn, and returning through the Flintridge Hills to Pasadena. (Price, \$1.) Busses leave from both hotels (Huntington and Vista del Arroyo).

- 7:30 p. m.—President's dinner and dance of the California Medical Association at the Hotel Huntington.

Wednesday, May 11

- 9:00-11:00 a. m.—Registration.
9:30 a. m.—Second general meeting of the ninth annual convention, *Hotel Vista del Arroyo*, Mrs. Hobart Rogers presiding.
12:15 p. m.—Luncheon, honoring the incoming president, Mrs. Clifford Andrews Wright, and members of the State Board, with Mrs. Hobart Rogers presiding. The past state presidents will be guests of honor. The program and the speaker will be announced later. (Price \$1.25, plus tax.)
2:30 p. m.—Post-Convention State Board meeting, Mrs. Clifford Andrews Wright presiding.
Free afternoon.
Courtesy cards to golf and beach clubs are available to members.
8:30 p. m.—Evening attractions: Pasadena Community Playhouse; moving pictures. Detailed bulletin in the hotel lobby.
(For further information, consult attendants at Woman's Auxiliary information desk.)

President's Report

To the Members of the Auxiliary:

The Woman's Auxiliary to the California Medical Association is making progress. Early in the year a four-point program was outlined, and the county units have worked toward the fulfillment of these aims. The points stressed were:

1. *Organization.*—California has nineteen organized county units out of a possible thirty-nine. We have lost

one county and gained three—Santa Cruz, Butte, and Tulare. The organization of these three counties has added approximately sixty members to the State Auxiliary. Appreciable gains in membership have been recorded in most of the counties. With two more months in our year, we are still striving toward our goal—an Auxiliary in every county where a medical society exists.

2. *Lending Library.*—Our library is being used by county groups in planning programs. Books and plays suitable for health education programs have been added. The Library Committee is conducting a contest in an attempt to secure a suitable book plate for the books in our library. Results of this contest are not yet reported. We are urging that the Auxiliaries use the material in the library in assisting lay organizations to plan health programs.

3. *Public Relations.*—We are happy to report that more and more of our doctors' wives are taking active part in lay organizations and lending their influence in seeing that persons presenting health programs before these groups are capable of doing so. Many of the counties have sponsored lectures on venereal diseases, tuberculosis, cancer control, and other topics of vital interest to the people. These lectures have been well attended by the lay public. Two counties have conducted Health Institutes, and the attendance at these functions has been most gratifying.

As our year closes and the summer approaches, we are not contemplating on a subsidence of interest in our work. We hope to have our members working on a program of districting the patients of doctors in order that voting power may be readily reached relative to the public interest. This task will be undertaken under direct supervision of the California Medical Association.

We have actively sponsored *Hygeia*. Our goal was that each member be responsible for one subscription to *Hygeia*. While so far this goal has not been reached, we have made decided gain in promoting *Hygeia* this year. Marin County reports, on the basis of one subscription per member, 300 per cent subscription. Every county has participated in this campaign to place the lay journal of the American Medical Association before the public.

4. *National Convention.*—We have endeavored to stimulate interest in the National Convention, which meets in San Francisco, June 13 to 17 of this year. This is the first time in the existence of the Woman's Auxiliary to the California Medical Association that we have been privileged to entertain the national organization. The local committee is working very hard to make this convention an outstanding one—one that is worthy of the organization and of California.

The Woman's Auxiliary is fast becoming a leavening influence in the state and nation. We are being called upon for assistance in health programs for lay groups. It is through this affiliation that we are able to promote the conservation of public health and the advancement of medical science. We are attempting to assume our responsibility for leadership in these matters.

The achievements of this year have been accomplished through the fullest cooperation of every department and the enthusiastic effort of the individual members. The progress we feel we have made has been due largely to the guidance and loyal support of our Advisory Board of the California Medical Association. For this help the members in general, and I especially, am indeed grateful.

MRS. HOBART ROGERS, *President*.

WOMAN'S AUXILIARY TO THE CALIFORNIA MEDICAL ASSOCIATION CONVENTION COMMITTEES

MRS. ARTHUR T. NEWCOMB, *General Chairman*

Credentials and Registrations

Mrs. Charles C. Hall, Chairman	
Mrs. Mark Albert Glaser, Local Chairman	
Mrs. John Severy Hibben	Mrs. Hyman Miller
Mrs. Alvin G. Ford	Mrs. Rolland Thompson
Mrs. Arthur Bowen	Mrs. Paul A. Foster
Mrs. Edward W. Bak	Mrs. C. J. Stadfield
Mrs. Hans Schiffbauer	Mrs. Joseph B. Stevens
Mrs. Jesse L. Brockow	Mrs. Frederic N. Tyroler
Mrs. Edward M. Pallette	Mrs. Edwin J. Kirkpatrick
Mrs. Charles Coghlan	Mrs. Herbert S. Mooney

Information

Mrs. William C. Boeck, Chairman	
Mrs. Robert O'Neal, Vice-Chairman	
Mrs. William A. Swim	Mrs. Carl R. Howson
Mrs. Paul A. Quantance	Mrs. Harold E. Crowe
Mrs. John Martin Askey	Mrs. Franklin Farman
Mrs. Clifton H. Briggs	Mrs. Victor E. Thomas

Hospitality

Mrs. Elliot Alden, Mrs. James Fulton Percy, Co-chairmen	
Mrs. Mark Albert Glaser	Mrs. Clifford Andrews Wright
Mrs. C. G. Stadfield	Mrs. Edward Winslow Jones
Mrs. William H. Leake	Mrs. John Martin Askey
Mrs. Francis C. Hertzog	Mrs. Newell Jones
Mrs. Edwin B. Plimpton	Mrs. P. A. Gallant
Mrs. Charles E. Futch	Mrs. Robert L. Carroll
Mrs. Hiram C. Weaver	Mrs. Henry T. S. Bonesteel
Mrs. E. Vincent Askey	Mrs. Robert E. O'Conner
Mrs. Grant Lanphere	Mrs. Walter H. Boyd
Mrs. G. H. Homme	Mrs. A. Brockway
Mrs. John P. Nuttall	Mrs. Clinton D. Hubbard
Mrs. Harry V. Brown	Mrs. George H. Kress
Mrs. G. H. Ernberger	Mrs. C. Max Anderson
Mrs. Rafe C. Chaffin	Mrs. G. C. Sabichi
Mrs. Charles E. Phillips	Mrs. Frank E. Detling
Mrs. K. P. Stadlinger	Mrs. E. Eric Larson
Mrs. Harold E. Peterson	Mrs. Benjamin H. Sherman
Mrs. Simon Jesberg	Mrs. L. C. Burwell
Mrs. Clifford B. Walker	Mrs. Benjamin M. Frees
Mrs. Louis F. X. Wilhelm	Mrs. Crayton C. Snyder
Mrs. Scott D. Gleeten	Mrs. George Darby Maner
Mrs. R. C. Olmsted	Mrs. H. L. Charles

Special Hostesses (Daughters of Auxiliary Members)

Miss Phyllis Doane	Miss Shirley Brockway
Miss Gertrude Bames	Miss Helma Bames
Miss Marjorie Sherman	Miss Elizabeth Pallette
Miss Dorothy Spiers	Miss Faith Scroggy
Miss Dona Gale Myers	Miss Jane Gale Myers
Miss Maxine Quistgard	Miss Joe Dee Thomas
Miss Florence Alden	Mrs. Donald Laing
Mrs. Griffith Page	Mrs. Ralph Starkweather
Mrs. Hugh Sutherland	Mrs. Ward Rolland
Mrs. Dean Christy	Mrs. Carroll Graham
Mrs. Wallace Burton	

Transportation

Mrs. Rollan W. Kraft, Chairman	
Mrs. Harry Wiley	Mrs. Joseph Zeller
Mrs. Ralph Eusden	Mrs. Harry F. Markolf
Mrs. Roy R. Miller	Mrs. Paul Blaisdell
Mrs. Otto Bames	Mrs. Peter H. Blong
Mrs. L. Grant Baldwin	

Ushers and Pages

Mrs. Ward M. Rolland, Mrs. Carl E. Ebert, Co-Chairmen	
Mrs. Russell Decker	Mrs. Ralph E. Netzley
Mrs. George T. Burke	Mrs. William M. Maloney, Jr.
Mrs. Lyle G. Craig	Mrs. Charles Coghlan
Mrs. Jesse L. Brockow	Miss Phyllis S. Doane
Mrs. John B. Todd	Mrs. A. R. Graham

Decorations and Flowers

Mrs. Edward Winslow Jones, Chairman	
Mrs. William H. Daniels	Mrs. Vincent F. Flynn
Mrs. Russell M. Decker	Mrs. Frederick R. Speltz
Mrs. Wesley J. Woolston	

Headquarters

Mrs. Arthur T. Newcomb	Mrs. Philip Schuyler Doane
Mrs. James Fulton Percy	

Supplies and Printing

Mrs. Philip Schuyler Doane

Entertainment

Mrs. Elmer Belt, Chairman
Musical—Monday Evening

Studio Auto Tour

Mrs. Mark Albert Glaser, Chairman	
Mrs. Walter Boyd	Mrs. Harold D. Barnard
Mrs. Harry B. Breitman	Mrs. David N. Yaker
Mrs. Clifford B. Walker	

Luncheons

Tuesday, Mrs. William H. Leake, Chairman	
Wednesday, Mrs. A. Brockway, Chairman	
Mrs. R. B. Hope	Mrs. E. C. Pallette
Mrs. Otto Bames	

Finance

Mrs. H. Waldo Spiers, Chairman	
Mrs. Hewell Jones	Mrs. R. C. Chaffin

Publicity

Mrs. Arthur J. Annis, Chairman	
Mrs. Edward H. Williams	Mrs. Walter H. Boyd
Mrs. Joseph Zeller	Mrs. A. M. Hansen

Emergency and Aids to General Chairman

Mrs. Benjamin H. Sherman, Chairman	
Mrs. E. M. Pallette	Miss Florence Burger
Miss Lillian Bellah	Mrs. Philip Stephens

VIII—RAILROAD INFORMATION*

May 9-13, 1938

Ticket agents of principal rail lines in California, on presentation and surrender of identification certificates, will sell round-trip tickets to Pasadena, California, costing approximately 1½¢ per mile, and the certificates which you may send for will show the convention fares that will apply to Pasadena from principal California points. Tickets will be sold from May 4 to 13, inclusive, and return limit will be May 23, 1938. Stopovers are allowed. If longer return limit is desired, consult railroad ticket agent at Pasadena prior to May 23, 1938.

Send a stamped, self-addressed envelope to State Secretary to secure a certificate in order to obtain convention rate. Following are examples of round-trip convention fares from points named below to Pasadena, California, available on presentation of certificate:

Anuburn	\$15.05	Redding	19.05
Bakersfield	5.55	Sacramento	13.95
Barstow	4.00	Salinas	11.15
Calexico	7.50	San Bernardino	1.80
Chico	16.85	San Diego	4.10
El Centro	7.50	San Francisco	14.60
Eureka	23.60	San Jose	13.20
Fresno	8.80	San Luis Obispo	7.15
Los Angeles40	Santa Barbara	3.55
Marysville	15.55	Santa Cruz	12.30
Merced	10.45	Stockton	12.50
Modesto	11.60	Tulare	7.45
Redding	19.05	Visalia	7.75
Oakland	14.45	Woodland	14.50
Oroville	16.35	Yreka	23.10
Paso Robles	8.20		

MOTOR CAR ROUTES TO THE HUNTINGTON

From San Francisco:

Follow U. S. Highway No. 99 to State Highway 134 in Glendale. Turn left, follow State Highway 134, which is Colorado Street, in Pasadena. Continue to 800 block on East Colorado, where Oak Knoll Avenue intersects. Turn right on Oak Knoll to The Huntington, 1401 South Oak Knoll Avenue.

From Los Angeles:

Go out North Spring or North Broadway to end, which is Mission Road. Turn left on Mission Road to Huntington Drive, which is a continuation of Mission Road. Follow Huntington Drive to the 1,000 block in San Marino. Turn left on Oak Knoll Avenue to Hotel Huntington.

LOCAL TRANSPORTATION ON PACIFIC ELECTRIC RAILWAY

The out-of-town members who arrive in Los Angeles by train can reach the Hotel Huntington through the Red Cars—Pacific Electric railway, marked "Pasadena via Oak Knoll."

The cars on this route leave the Pacific Electric station on the southeast corner of Sixth and Main streets according to the schedule printed below. The time interval to reach the Hotel Huntington at the Hotel Huntington station in Pasadena is about forty minutes. The fare is 20 cents each way; round trip, 40 cents.

Time table at the date of this printing is as follows:

Leave Los Angeles at..	6:02 a.m.	Leave Los Angeles at..	3:50 p.m.
" " " " "	6:22 "	" " " " "	4:10 "
" " " " "	6:51 "	" " " " "	4:31 "
" " " " "	7:10 "	" " " " "	4:44 "
" " " " "	7:30 "	" " " " "	5:08 "
" " " " "	7:50 "	" " " " "	5:18 "
" " " " "	8:10 "	" " " " "	5:33 "
" " " " "	8:30 "	" " " " "	5:53 "
" " " " "	8:50 "	" " " " "	6:13 "
" " " " "	9:10 "	" " " " "	6:33 "
" " " " "	9:30 "	" " " " "	6:53 "
" " " " "	10:10 "	" " " " "	7:13 "
" " " " "	10:30 "	" " " " "	7:33 "
" " " " "	10:50 "	" " " " "	8:13 "
" " " " "	11:10 "	" " " " "	8:33 "
" " " " "	11:30 "	" " " " "	8:53 "
" " " " "	11:50 "	" " " " "	9:13 "
" " " " "	12:10 p.m.	" " " " "	9:33 "
" " " " "	12:30 "	" " " " "	9:53 "
" " " " "	12:50 "	" " " " "	10:13 "
" " " " "	1:10 "	" " " " "	10:33 "
" " " " "	1:30 "	" " " " "	10:53 "
" " " " "	1:50 "	" " " " "	11:23 "
" " " " "	2:10 "	" " " " "	11:53 "
" " " " "	3:30 "	" " " " "	12:23 a.m.

(First car leaves at 6:02 a. m., and last car at night leaves at 12:23 a. m. from Los Angeles for Pasadena.)

SOUTHERN PACIFIC TRAINS: NORTH AND SOUTH

Southern Pacific Trains arriving from San Francisco, pull into Los Angeles as follows:

"Lark" leaves San Francisco 9:00 p.m.; arrives in Los Angeles at 9:00 a.m.

"Sunset" leaves San Francisco 8:00 p.m.; arrives in Los Angeles at 8:10 a.m.

"Daylight" leaves San Francisco 8:15 a.m.; arrives in Los Angeles at 6:00 p.m.

"Coaster" leaves San Francisco 6:15 p.m.; arrives in Los Angeles at 8:00 a.m.

"Owl" leaves Oakland 6:30 p.m.; arrives in Los Angeles at 8:35 a.m.

On the return trip from Los Angeles to San Francisco, the trains leave and arrive at same time, reversing hours of departure and arrival.

IX—COMMERCIAL EXHIBITS

Aloe Company, A. S., 932 South Hill Street, Los Angeles. Booths Nos. 43 and 44.

Ayerst, McKenna & Harrison, Ltd., 781 Williams Street, Montreal, Canada. Booth No. 8.

Baxter, Don, Inc., 1505 Gardena Avenue, Glendale. Booth No. 45.

Benjamin Company, M. J., 323 West Sixth Street, Los Angeles. Booth No. 1.

Calso Company, The, 524 Gough Street, San Francisco. Booth No. 20.

Coca-Cola Company, The, Atlanta, Georgia. Booth No. 19.

Cutter Laboratories, Berkeley. Booth No. 29.

Dictograph Products Company, Inc., 457 Powell Street, San Francisco. Booth No. 18.

Doctors' Business Bureau, The, San Francisco and Los Angeles. Booth No. 46.

Emerson Drug Company, Baltimore, Maryland. Booth No. 26.

Heinz Corporation, H. J., 2998 San Pablo Avenue, Berkeley. Booth No. 27.

Hollister-Stier Laboratories, 2003 Wilshire Boulevard, Los Angeles. Booth No. 9.

Horlick's Malted Milk Corporation, Racine, Wisconsin. Booth No. 16.

Jones Metabolism Equipment Company, 1870 Ogden Avenue, Chicago, Illinois. Booth No. 15.

Kip Corporation, 919 East Pico Street, Los Angeles. Booth No. 4.

Lederle Laboratories, 450 Sutter Street, San Francisco. Booth No. 24.

Lepel High Frequency Laboratories, Inc., 39 West Sixtieth Street, New York, New York. Booth No. 17.

Liebel-Flarsheim Company, 303 West Third Street, Cincinnati, Ohio. Booth No. 33.

Magnuson X-Ray, 1814 Ninth Street, Los Angeles. Booth No. 39.

Medical Bureau (M. Burniece, director), Pittsfield Building, Chicago, Illinois. Booth No. 14.

Medical Protective Company, The, Wheaton, Illinois. Booth No. 23.

Morning Milk Company, Continental Bank Building, Salt Lake City. Booth No. 34.

Mosby Company, C. V., 3523 Pine Boulevard, St. Louis, Missouri. Booth No. 7.

Pet Milk Sales Corporation, St. Louis, Missouri. Booths Nos. 21 and 22.

Philip Morris & Company, Ltd., 119 Fifth Avenue, New York. Booth No. 5.

Scherer Company, R. L., 699 Sutter Street, San Francisco. Booths Nos. 2 and 3.

Stacey, J. W., Inc., Flood Building, San Francisco. Booth No. 30.

Stokely Brothers & Company, Inc., South East Street, Indianapolis. Booth No. 38.

Walters Surgical Company, 522 Sutter Street, San Francisco. Booth No. 12.

Western Surgical Supply Company, Ltd., 1926 Wilshire Boulevard, Los Angeles. Booth No. 40.

Zweegman School for Medical Secretaries, 450 Sutter Street, San Francisco. Booth No. 6.

* What is here given is printed for its general informative value. It is wise to check on your own ticket rates and time tables.

X—LOS ANGELES, PASADENA, AND HOTEL HUNTINGTON— OUR CONVENTION HOSTS

The members of the Los Angeles County Medical Association and its Pasadena branch unit are our hosts for our sixty-seventh annual session. They extend a cordial welcome to all members and bid them to come to this session that promises much through its official program and entertainment features.

A large volume could be written about our host association, the largest in membership in our State organization. This, however, is impossible at this time, and probably unnecessary. Unnecessary, because from time to time its organizational activities have been recorded in our journal. Again, many of our members have had occasion to enjoy attendance at meetings of this unit.

It is not amiss to state that it was the foresight of its officers and members that accomplished the erection and operation of its Association building at 1925 Wilshire Boulevard, and the eventual acquisition of nearly a quarter of a million dollars in property. From this central home the numerous activities of the County Association radiate. Mention is made of its library, café and dining room, its beautiful mural auditorium and executive offices. The executive and administrative staff render valuable services in incalculable amount to every member. The twenty permanent standing committees concern themselves with the organizational problems of these times.

The twelve branch units and fifteen scientific sections provide programs and meetings of highest merit. The

opinion is unanimous that our host unit is an outstanding medical unit not only in California, but also in the nation. The assurance can be given that its guests during this annual session will be the recipients of a most cordial welcome and gracious hospitality. The following constitutes its roster of officers for the current year: George H. Kress, president; Ralph B. Eusden, vice-president; George D. Maner, secretary-treasurer; S. K. Cochems, executive secretary; Fred B. Clarke, chairman of the Council; E. T. Remmen, vice-chairman of the Council; Donald J. Frick, chairman of the Board of Trustees.

The Pasadena branch is officered by: R. C. Olmsted, president; L. J. Brunie, vice-president; Lyle G. Craig, secretary.

This branch meets every third Tuesday in its own auditorium, which is comfortably furnished and has many rare and interesting pictures of outstanding medical men. Distinguished winter visitors frequently appear on its program.

The officers and members of the Pasadena branch will be particularly prominent in the rôle of hosts. Through them opportunities will be provided to visit points of interest that are the pride of the Pasadena area.

It can be safely asserted that all who attend this annual session will return home with many pleasant memories of profitable and enjoyable days amid these genial hosts.

FREDERICK C. WARNSHUIS.

HOTEL HUNTINGTON, PASADENA

The Huntington is internationally known and one of the leading resort hotels in America. It is famous for its beauty, hospitality, and excellent cuisine. The entire staff takes a personal interest in the success of each convention held here and assists in every way possible. There have been many conventions held here and they have all agreed that their Huntington convention was the finest their group had ever held.

ATTRACTIVE SETTING

Location and Grounds.—The Huntington is situated in its own thirty-acre park in the Oak Knoll residential district of Pasadena. It is but ten minutes from the business district of the city by street-car (the interurban line that runs between Pasadena and Los Angeles passes the hotel grounds) and but thirty-five minutes from the downtown section of Los Angeles. There are ample facilities on the grounds to keep your group entertained between meetings. There is a beautiful swimming pool in the midst of our Japanese Gardens and a barbecue pit at one end, which make it an ideal place to hold an alfresco supper or luncheon. Most organizations find the supper at the pool the most delightful affair of their whole convention. We also have tennis courts, badminton courts, a golf putting green, ping pong, and other attractions to keep you busy.

Accessibility.—The Santa Fe Railroad runs through Pasadena, and the station is about ten minutes from the hotel. The Southern Pacific and Union Pacific railroads do not come directly into Pasadena, the Southern Pacific station being at Alhambra, which is about fifteen minutes' drive; and the Union Pacific at East Los Angeles, which is about twenty to twenty-five minutes from the hotel. Both railroads, however, have a bus service and could arrange to transport you right to the hotel door. The Southern Pacific also has a station at Glendale which is quite convenient for those coming down from the North, especially if someone can drive over to that station and meet them. If that is not possible, they can go directly into Los Angeles and take the Pacific Electric from there right to the entrance of the Huntington grounds. Pasadena can be easily reached by any of the automobile routes.

Historical Background of Pasadena.—This part of the country has a wonderful historic background and within sight and easy reach of the hotel are many famous landmarks which were left by the Spaniards, who occupied this territory before it became part of the United States. About twenty-five minutes from here, for instance, is the San Gabriel Mission, which was founded by the Franciscan Padres during the time of the Spanish occupation. In the early days there were no towns, but just these two Missions, and it is interesting to note the number of cities that

have grown up around these settlements. Pasadena, itself, is a word derived from the Chippewa Indian dialect, meaning "Crown of the Valley," and in 1770 Don Gaspar de Portola and his band of Spanish explorers camped here. They called this section San Pasqual, and it was not until 1875 that the present name was given the city. It was called Pasadena because it not only described the location of what was then a village overlooking the valley, but also because it was beautiful, musical, and euphonious—a reputation it has held to the present time. The city itself is a cultural center, and it is known the world over for its Tournament of Roses parade on New Year's Day and for the East-West football classic which is held in the Rose Bowl on the same day. The Tournament of Roses is a parade five miles in length, graced with floral tributes from cities all over the Pacific Coast. Some floats require one hundred thousand blossoms to decorate, and no artificial blooms of any kind are allowed to appear on the floats.

Henry E. Huntington Library and Art Gallery.—Within ten minutes of the hotel is the Henry E. Huntington Library and Art Gallery. This ranks among the world's greatest museums. It comprises about two hundred thousand rare books and more than a million and a quarter original manuscripts of very great money value. The Huntington Art Gallery contains the greatest of English portraits ever gathered under one roof. The collection is made up of forty-five paintings: forty-one portraits and four landscapes. The most famous painting in this collection is Gainsborough's Blue Boy, which was bought from the Duke of Westminster in 1921 for the sum of \$640,000. Pinkie, the companion picture of the Blue Boy, is also on display at this gallery. When this marvelous collection was opened to the public, Mr. Huntington stipulated that there should be no charge of any kind made for admittance to the gallery or to the library. The only requisite is that reservations be made in advance, inasmuch as the number of people visiting the museum in any one day is limited, and they extend a very cordial invitation to groups such as yours to visit this art center, which is also one of California's garden spots.

California Institute of Technology.—The California Institute of Technology is also located within ten minutes of the hotel. Professors of international repute in the field of technical education and research gather here. The laboratories are equipped with the most modern instruments for scientific research. The million-volt electrical laboratory and the famous Guggenheim Aeronautical Experimental Station make a visit to this institution very interesting. Arrangements can be made for your group to see these special features, and some member of the faculty

will accompany you on their tour and give a little explanatory lecture which will make such a visit worth while. The 200-inch mirror is being ground there for use on Mount Palomar.

Mount Wilson Observatory.—Then, on the summit of mile-high Mount Wilson is situated the Mount Wilson Observatory of the Carnegie Institute of Washington, D. C. The world's largest telescope is located here, as well as a fine exhibition of astronomical photographs. A very interesting lecture is given on Friday nights and at that time visitors have an opportunity of looking through the telescope. From this point there is an excellent view of San Gabriel Valley and the coast line, as well as the lights of fifty-six cities in Southern California—a magnificent sight.

Other Attractions.—There are many interesting things to be seen in Pasadena; in fact, they are too numerous to mention. Among them are the Pasadena Community Playhouse, which is one of the most famous little theaters in the country; Mount Lowe; the Lyons Pony Express Museum, in which relics of early California life are housed. There is also the Civic Center, the Colorado Street Bridge, and many beautiful residential estates, as well as the Santa Anita Racing Park.

Picture Bridge.—One important sightseeing spot right on the Huntington grounds is the picture bridge, which has forty-one oil paintings showing typical landscapes and landmarks of California. For those who do not have an opportunity of taking a post-convention trip this will be a particular boon, for it will enable them to see California at a glance. This is a very unique feature as there is only one other bridge of pictures in the world, and that is the one in Lucerne, Switzerland.

Hotel Accommodations.—The Huntington, which is situated so near the populous center of Southern California is far enough away to afford all the advantages of a country resort combined with the conveniences of a city hotel. It maintains a quiet dignity. The spacious lobby, which is always cool, greets you upon entering the hotel with that luxurious atmosphere which makes you feel immediately at home. It overlooks the San Gabriel Valley with its Spanish type homes with red tile roofs, graceful eucalyptus trees, date palms, peppers, and oaks as well as our own horseshoe gardens. It is indeed a delightful place to gather for a bridge tea, reception, or chat before dinner. Our rooms are all outside rooms, facing the Sierra Madre Mountains on the north and overlooking the San Gabriel Valley on the south. Each room or suite has its own private bath. There are six sleeping floors and, of course, elevator service.

The main dining room is large enough to seat nine hundred for dinner. It is an extremely attractive room, with a very high ceiling and is decorated in green and gold. It lends itself beautifully to any floral decorations, and table flowers are really all that is necessary. It is lined on either side by windows looking out upon the patio, the Japanese Gardens, and the swimming pool. The acoustic properties are splendid and, inasmuch as the floor is completely carpeted, there would be no disturbance or noise from persons walking around the room. There are alcoves on either side of the room in which our regular guests usually sit when a convention is in session. Other rooms are large enough for special luncheons, dinners, or meetings. These rooms seat from fifteen to one hundred for a meal, or twenty-five to one hundred seventy-five for a meeting.



Fig. 2.—Aeroplane view of the Huntington Hotel showing a portion of the twenty-nine acre grounds.

Part II

PRE-CONVENTION BULLETIN*

FOREWORD.—The official reports which follow will be presented at the coming session of the House of Delegates.

Delegates are urged to familiarize themselves with their contents.

Members, likewise, are requested to become familiar with the recommendations of these reports, and to discuss them with other members and delegates.

* * *

I

REPORTS OF GENERAL OFFICERS

REPORT OF THE PRESIDENT

To the Members of the House of Delegates and the Members of the California Medical Association:

Your President intends to transmit his official observations and recommendations to the House of Delegates and the membership at large in his addresses to the House of Delegates, and before the first general meeting.

During the year, in so far as it was possible for me to accept, I have visited, in company with councilors and general officers, or alone, some eleven county societies. I have also attended every meeting of the Council and the Executive Committee.

Respectfully submitted,

Howard Morrow, *President*.

REPORT OF THE PRESIDENT-ELECT

To the President and the House of Delegates:

Your President-elect has attended all meetings of the Council and Executive Committee, and has cared for such committee work as has been assigned to him; and, in company with other officers of the Association, he has visited all the county units in Southern California.

He is most appreciative of courteous and cordial expressions of good will that have been extended to him.

We will all look forward to a happy year of service in behalf of organized medicine in its local, state and national units.

Respectfully submitted,

W. W. Roblee, *President-elect*.

REPORT OF THE SPEAKER OF THE HOUSE OF DELEGATES

To the President and the House of Delegates:

During the past year your Speaker has attended all meetings of the Council and the Executive Committee, of which bodies he is, ex officio, a member. He has performed such special committee duties as have been assigned to him and, in company with the President-elect, Secretary, and Councilors, has visited most of the societies in the southern counties.

The House of Delegates will convene promptly at 8 p. m. on Monday, May 9. Its second meeting will be on Wednesday, May 11. The Speaker urges all delegates to be in their seats at the hour of convening, and takes this occasion to remind the delegates that they have assumed very serious duties in accepting office. These duties are not to be taken lightly, and, even though some small personal sacrifice is demanded, the responsibility of a delegate is such that the inconvenience to himself is to be borne as the price of his office.

The Speaker wishes also to urge all delegates and alternates to read the Pre-Convention Bulletin carefully in

order that they may be familiar with the work and the problems of their organization.

Respectfully submitted,

Lowell S. Goin, *Speaker*.

REPORT OF THE CHAIRMAN OF THE COUNCIL

To the President and the House of Delegates:

In order that the Council may present to the House of Delegates a report that embraces all of its official actions up to the time that the House of Delegates convenes, the annual report of the Council will be presented at the first meeting of the House of Delegates.

Respectfully submitted,

Morton R. Gibbons, *Chairman*.

REPORT OF SECRETARY-TREASURER

To the President and the House of Delegates:

In submitting this annual report for 1937 to the Council and, through it, to the members of the Association, I desire to first express a very genuine appreciation to all the officers and members who have contributed so freely to make possible the accomplishments of the past year. Generous credit is given to committees and officers of county units who have given of their time, energy and experience. Unity of action, with a common desire to attain the purposes of organization, has made it possible for our Association to experience a most successful year as is revealed in this report of stewardship.

MEMBERSHIP

The Association's numerical strength is recorded in the following tabulation:

MEMBERSHIP AS OF DECEMBER 15, 1937

Organized	County	No. Members		New	Delinquents
		1936	1937		
1902	Alameda	476	515	37	12
1903	Butte	24	23	2	3
1903	Contra Costa	49	50	0	3
1902	Fresno	112	117	8	0
1903	Humboldt	30	34	4	0
1903	Imperial	27	26	0	1
1902	Kern	48	50	4	2
1903	Kings	15	17	1	4
1914	Lassen-Plumas-Modoc	11	14	3	0
1871	Los Angeles	2,200	2,357	148	50
1902	Marin	40	41	1	0
1902	Mendocino-Lake	19	23	5	1
1903	Merced	28	28	3	3
1903	Monterey	51	57	3	5
1903	Napa	34	36	2	0
1902	Orange	109	113	10	5
1889	Placer	30	35	2	0
1903	Riverside	69	70	5	6
1902	Sacramento	143	148	9	1
1904	San Benito	7	6	0	1
1902	San Bernardino	137	146	17	8
1902	San Diego	258	274	23	9
1902	San Francisco	812	831	59	14
1902	San Joaquin	98	107	12	3
1903	San Luis Obispo	29	26	3	3
1905	San Mateo	58	63	6	1
1902	Santa Barbara	102	104	9	3
1902	Santa Clara	171	171	9	2
1903	Santa Cruz	30	32	3	1
1903	Shasta	15	17	2	2
1916	Siskiyou	15	15	1	0
1905	Solano	26	27	2	1
1903	Sonoma	54	49	1	5
1906	Stanislaus	40	42	2	1
1906	Tehama	11	9	0	1
1906	Tulare	38	35	2	2
1903	Ventura	35	33	2	3
1903	Yolo-Colusa-Glenn	26	27	4	1
1903	Yuba-Sutter	15	16	1	0
		5,492	5,784	407	155

Active Members5,784

Associate members 5

Retired members 63

Honorary members 2

Total5,854

Number of members died

In 1937..... 75

* Section 3. Article XII, of the California Medical Association Constitution states, in part: "The Association, prior to the annual session, shall print a 'Pre-Convention Bulletin,' which shall contain reports of officers and committees. . . . A copy of the 'Pre-Convention Bulletin' shall be given to each delegate and alternate on or before registration."

COUNCILOR DISTRICTS

FIRST DISTRICT—SQUARE MILES, 36,376
Calvert L. Emmons, Councilor, Ontario

County	1936	1937	New	Delinquent
Imperial	27	26	0	1
Orange	109	113	10	5
Riverside	69	70	5	6
San Bernardino	137	146	17	8
San Diego	258	274	23	9
	600	629	55	29

SECOND DISTRICT—SQUARE MILES, 4,115
Carl R. Houson, Councilor

County	1936	1937	New	Delinquent
Los Angeles	2,200	2,357	148	50

THIRD DISTRICT—SQUARE MILES, 15,800
Louis A. Packard, Councilor

County	1936	1937	New	Delinquent
Kern	48	50	1	4
San Luis Obispo	29	26	3	3
Santa Barbara	102	104	9	3
Ventura	35	33	2	3
	214	213	15	13

FOURTH DISTRICT—SQUARE MILES, 17,042
Axel E. Anderson, Councilor

County	1936	1937	New	Delinquent
San Joaquin	98	107	12	3
Fresno	112	117	8	0
Kings	15	17	1	4
Merced	28	28	3	3
Stanislaus	40	42	2	1
Tulare	38	35	2	2
	331	346	28	13

FIFTH DISTRICT—SQUARE MILES, 7,556
Alfred L. Philips, Councilor

County	1936	1937	New	Delinquent
Monterey	51	57	3	5
San Benito	7	6	0	1
San Mateo	58	63	6	1
Santa Clara	171	171	9	2
Santa Cruz	30	32	3	1
	317	329	21	10

SIXTH DISTRICT—SQUARE MILES, 42,19
Karl L. Schaupp, Councilor

County	1936	1937	New	Delinquent
San Francisco	812	831	59	14

SEVENTH DISTRICT—SQUARE MILES, 1,466
Oliver D. Hamlin, Councilor

County	1936	1937	New	Delinquent
Alameda	476	515	37	12
Contra Costa	49	50	0	3
	525	565	37	15

EIGHTH DISTRICT—SQUARE MILES, 28,617
Fred N. Scatena, Councilor

County	1936	1937	New	Delinquent
Butte	24	23	2	3
Yolo-Colusa-Glenn	26	27	4	1
Lassen-Plumas-Modoc	11	14	3	0
Placer	30	35	2	0
Sacramento	143	148	9	1
Shasta	15	17	2	2
Yuba-Sutter	15	16	1	0
Tehama	11	9	0	1
	275	289	23	8

NINTH DISTRICT—SQUARE MILES, 23,255
Henry S. Rogers, Councilor

County	1936	1937	New	Delinquent
Humboldt	30	34	4	0
Marin	40	41	1	0
Mendocino-Lake	19	23	5	1
Napa	34	36	2	0
Siskiyou	15	15	1	0
Solano	26	27	2	1
Sonoma	54	49	1	5
	218	225	16	7

Comment.—In December, 1936, our membership in good standing numbered 5,492. At the close of the present year there is recorded a membership of 5,854, a net gain of 362, and a gross gain of 605. A delinquency of 155 for the year, which since the books have been closed, on Decem-

ber 20, has been reduced to 104, is most pleasing. The summarization, therefore, is that at the close of the year our membership totals 5,901.

There can no longer be any question of the declaration that the California Medical Association, with over 85½ per cent of licensed, eligible, resident physicians enrolled as members, is the representative organization and spokesman of the medical profession of California.

During 1937, seventy-five members responded to their last call. Their names are recorded in our archives associated with memories of their deeds of service and charity:

Edgar William Alexander, San Francisco
Luis Ferdinand Alvarez, Los Angeles
William Gillispie Attwood, Los Angeles
Charlotte LeB. J. Baker, Point Loma
Chester D. Ball, Orange
W. Jarvis Barlow, Los Angeles
John Edwin Beck, Tulare
Mabel T. Bell, Ventura
Marie Antoinette Bennette, San Bernardino
Fred Phelps Bowen, Los Angeles
Walter Vernon Brem, Los Angeles
Harry V. Brown, Glendale
Newbern N. Brown, Bakersfield
James L. Busby, Pasadena
Henry B. Carey, San Francisco
John I. Clark, Orange
Harry Carson Coe, Oakland
Claire H. Denman, Berkeley
Alfred J. Downs, Los Angeles
Albert Knight Dunlap, Sacramento
Irving H. Eddy, Glendale
James A. Ellis, Alameda
Etta Farmer, Sacramento
William Edward Fehlman, Santa Cruz
Joseph C. Friedman, Banning
Willis LeF. Gatchell, Butte, California
David Garrison Ghrist, Los Angeles
Hannah A. Goodridge, San Jose
Frank Pierce Gray, San Francisco
Louis D. Green, San Francisco
John D. Grissim, Oakland
Harold G. Gross, Eureka
Emil O. Hay, Sacramento
John Randolph Haynes, Los Angeles
William T. Heffernan, Imperial
Edgar H. Howell, San Francisco
Leonard Charles Hull, Hollister
Charles Breckenfeld Jones, Sacramento
Edwin Frank Kehr, Carmel
Bert C. Kern, Jackson
Walter D. Lenker, San Bernardino
Melbourne Mabey, Santa Ana
James G. Martin, Long Beach
Frank W. Miller, Los Angeles
Harold A. Miller, Alameda
William P. Millsbaugh, Los Angeles
Andrew J. Minaker, San Francisco
Thomas William Moffitt, Hollywood
George Thomas Mountford, Coalinga
Philip Newmark, Los Angeles
T. C. O'Connor, Jr., Murphy
Margaret R. Otis, Los Angeles
John Thomas Peery, Corcoran
John F. Pruett, San Francisco
Thomas Rea, Yreka
Carl Renz, San Francisco
George Henry Roth, Los Angeles
Charles Wesley Rook, Montrose
James W. Seawell, Sonoma
Harlan Lewis Smith, Fair Oaks
Munford Smith, Los Angeles
R. Knight Smith, San Francisco
Jacobus C. Solomon, Los Angeles
John C. Spencer, Palo Alto
William Earnshaw Styann, San Francisco
Earl Bertrand Sweet, Los Angeles
Frank D. Sweet, Long Beach
Richard F. Tomlinson, San Francisco
Dwight Howe Trowbridge, Fresno
J. Russell Van Sickle, Santa Monica
Lyman Trevitt Wade, San Luis Obispo
Albert Samuel Wall, Los Angeles
Oran Lamar Webster, Holtville
Joseph Sully Wheeler, Santa Cruz
Daniel Webster Zirker, Merced

Our sympathies embrace all those in the homes of these departed members.

FINANCES

The following statement of resources, income, and expenditures, as certified to by our licensed, bonded public accountants, transmits a summary of the year's financial operations:

INCOME AND EXPENDITURES

CALIFORNIA MEDICAL ASSOCIATION

For the period December 19, 1936, to December 18, 1937

INCOME

Dues and General

Membership dues	\$84,494.75	
Exhibits at annual meeting	5,175.00	
California Medical Society—Services..	600.00	
Interest earned	445.41	
Miscellaneous	72.77	
		\$ 90,787.93

Official Journal—CALIFORNIA
AND WESTERN MEDICINE

Advertising	\$26,645.95	
Subscriptions	581.39	
Reprint sales	2,799.31	
Addressograph income	136.23	
Miscellaneous—Recoveries on accounts previously written off.....	85.68	
		30,248.56
		\$121,036.49

EXPENDITURES

Administrative	\$29,357.25	
Scientific, educational and public relations	16,461.74	
Official journal—CALIFORNIA AND WESTERN MEDICINE.....	40,414.35	
Legal	4,576.71	
		90,810.05
Net income		\$30,226.44

EXPENDITURES

CALIFORNIA MEDICAL ASSOCIATION

For the period December 19, 1936, to December 18, 1937

ADMINISTRATIVE

Salary—Secretary-Treasurer and Director of Public Relations	\$12,000.00	
Salaries—clerical	3,700.00	
		\$15,700.00
Travel expense:		
Secretary-Treasurer and Director of Public Relations	1,022.15	
Council	1,166.08	
Executive Committee	255.30	
American Medical Association delegates	1,318.95	
		3,762.48
Rent	3,288.00	
Annual meeting expense.....	2,568.97	
Office supplies and expense.....	1,197.15	
Telephone and telegraph.....	980.19	
Postage	461.48	
Office equipment	56.80	
Council general expense.....	203.32	
Annuities for employees.....	200.00	
Miscellaneous	938.86	
		\$29,357.25

SCIENTIFIC, EDUCATIONAL AND
PUBLIC RELATIONS

California Medical Economic Survey expense	\$ 5,290.94	
Contributions to medical libraries.....	2,723.50	
Legislation and public policy expense	3,909.84	
Public relations—Clerical salaries.....	1,071.90	
Committee on scientific work.....	558.93	
Postgraduate instruction	440.82	
Cancer Commission expense.....	135.60	
Other committee activities.....	2,330.21	
		16,461.74

OFFICIAL JOURNAL—CALIFORNIA
AND WESTERN MEDICINE

Printing	\$24,459.55	
Salary—Editor	4,000.00	
Salaries—Clerical	3,560.00	
Advertising commissions	3,690.29	
Cost of reprints	2,365.09	
Distribution expense	1,203.06	
Discounts and collection expense.....	280.63	
Office supplies and expense.....	620.13	
Addressograph cost	154.14	
Provision for doubtful accounts.....	77.00	
Miscellaneous	4.50	
		40,414.35

LEGAL

Retainer fees	\$ 4,000.00	
Extra fees	200.00	
Miscellaneous expenses	376.71	
		4,576.71
Total		\$90,810.05

BALANCE SHEET

TRUSTEES OF THE CALIFORNIA MEDICAL ASSOCIATION

December 18, 1937

ASSETS

Cash		
On deposit:		
Commercial account:		
Bank of America N. T. & S. A.	\$ 559.27	
Savings accounts:		
Crocker First Federal Trust Co.	\$2,028.99	
Bank of America N. T. & S. A.	933.61	
The San Francisco Bank	728.05	
		3,690.65
		\$ 4,249.92

Marketable Securities

U. S. Government securities—at cost (quoted market prices—\$53,342.51)		49,306.25
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Other Assets

Loans to California Medical Association	\$31,000.00	
Accrued interest on bonds..	1,149.42	
Accrued interest on savings accounts	75.65	
		32,225.07
		\$85,781.24

LIABILITIES

Members' contributions to Endowment Fund—Note A..	\$ 200.00	
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Net Worth

Contributed Surplus		
Received from California Medical Association	\$75,000.00	
Earned Surplus		
Balance, December 19, 1936	\$8,926.30	
Net income for period December 19, 1936, to December 18, 1937	1,654.94	
		10,581.24
		\$85,581.24

Note A—Contributions to an endowment fund for the purpose of providing income for the California Medical Association are being tentatively accepted, subject to return to contributors in the event that the amounts finally received do not warrant the establishment of such a fund.

INCOME AND EXPENDITURES

TRUSTEES OF THE CALIFORNIA MEDICAL ASSOCIATION

For the period from December 19, 1936, to December 18, 1937

INCOME

Interest on bonds.....	\$1,494.02	
Interest on savings accounts	191.42	
		\$1,685.44

EXPENDITURES

Miscellaneous		30.50
NET INCOME		\$1,654.94

Comment.—A net operating gain of \$30,226.44 for the year is quite gratifying. This has been accomplished by constant alert supervision. Economy in administrative costs in the amount of some \$15,000 instituted during the last two years have been continued. Additional savings of some \$3,500 was accomplished during the last year. This economy has by no means limited or hampered any of the Association's functions or activities. Income earnings, outside of annual dues, have been increased by obtaining greater advertising revenue, sale of exhibit space, lessened cost of commissions and the assuming of work that would have required added expense had it been delegated to others.

Unpredictable, but imperative, expenses to the amount of \$6,238.14, decreased what otherwise would have been a larger net operating gain for the year.

The governing budget is closely adhered to. The Auditing Committee approves all accounts every month before vouchers are issued. Vouchers are signed by the chairman and the secretary-treasurer. A copy of the monthly balance sheet and statement is sent to every general officer and councilor each month. Association expenditures and reserves are safeguarded and carefully administered.

CALIFORNIA AND WESTERN MEDICINE

Under the able editorship of Dr. George H. Kress, our official publication continues its prestige in the field of medical journals. Grateful acknowledgment is made to the editor for many gracious courtesies and ever willing helpfulness in supervising the business details of publication.

Advertising income was \$26,645.95. An average of 6,300 copies were mailed each month. Included in this number are the complimentary copies sent to officers and members of the House of Delegates of the American Medical Association.

Additional comment upon our JOURNAL will be made in the editor's annual report.

ASSOCIATION ACTIVITIES

A studious endeavor has been made each month to report through the medium of our official journal upon the activities of the Council, Executive Committee, and the work of standing and special committees. The purpose being to keep all members abreast with the affairs of the Association and the representation that was being made on behalf of all members. Therefore, at this time, only brief summaries will be recorded for the purpose of recapitulation.

(a) *Annual Conference of Officers, Councilors, County Secretaries, and Standing Committees.*—This was held in October in San Francisco. An innovation was introduced by the presence of those who constitute the membership of standing and special committees. The value of these annual conferences has been attested to by the attendants' comments published in the November and December issues of the JOURNAL. These conferences afford opportunity for better conception of Association policies and problems and inspiring a unity of action in the attainment of desired organizational objectives. There can be no sound solution of any problem without a clear understanding of its nature and portent; hence these informative conferences are of great value and justify the expense involved.

(b) *Postgraduate Program.*—An outstanding expanding Association activity is the Five-Year Postgraduate Program as announced in the Supplement to the November issue of CALIFORNIA AND WESTERN MEDICINE. The foreword in that supplement is explanatory of this Association function and should be referred to.

Program arrangements and the holding of these conferences are under way. Further report will be made to the House of Delegates by the committee.

The details of application and conducting of these sessions places a very greatly increased correspondence responsibility upon the secretary's office that will eventually require the services of a full-time stenographer.

(c) *Public Health Education.*—The secretary's office has arranged several series of educational lectures, and demonstrations for lay organizations that evoked much favorable comment. For the coming year, many such series have been scheduled for Young Women's Christian Associations, Women's Clubs, and Parent-Teacher Association organizations, and other such lay groups.

Your secretary considers this to be an important educational function, and when sound public and private opinion is engendered in regard to questions of public and private health, misunderstandings will disappear and people will no longer be misled by those who prey upon and profit from public lack of understanding of laws governing human health and health welfare. It is purposed to expand this educational activity. The creating of public good will is most vital to our interests.

(d) *Public Contacts.*—Contacts have been established, maintained, and continued with representatives of departments of state and county governments, boards of commerce, and trade, dental, hospital, and nursing organizations, Young Women's Christian Association, Federation of Women's Clubs, Parent-Teacher Association, Safety Council, Forestry Service, trade groups, and similar representative bodies. Daily, many letters of inquiry have been received from these groups, to which prompt answers are

sent. Cordial relations are being fostered, and public confidence is being created by these contacts.

(e) *Committees.*—All possible assistance has been rendered to all committees and all the facilities of the headquarters office have been placed at their disposal to aid in every possible way in bringing about the greatest results from committee activities.

(f) *Annual Session.*—Appraisal of each annual session rests with the officers and members. It may be assumed, from expressions and records of attendance, that each annual session is productive of distinct benefits to all participants.

The selection of a meeting place that provides satisfactory and adequate accommodations is becoming, or rather is, a serious question. Increased attendance, larger section and general meetings, expanding technical and scientific exhibits, cause some of the accustomed meeting places of former years to now be inadequate. Your secretary presents a recommendation at the conclusion of this report upon this subject.

(g) *County Charters and Constitutions.*—A survey revealed that a majority of the county units were not in possession of charters. These were lost through changes in county officers and failure to transfer official records. Under Council action, new charters have been issued. Several counties were without constitutions and by-laws, and steps were taken to have them adopt new constitutions and by-laws conforming to the provisions of the Association's Constitution and By-Laws.

(h) *Subscriptions to Medical Libraries.*—A contribution of \$2,723 was made to the Lane and the Los Angeles County Medical Libraries.

(i) *Visits to County Societies.*—During the year your secretary has, either in company with President Morrow, President-Elect Roblee, Speaker Goin, Councilor of the District, or alone, attended meetings of the following county societies: Orange, Riverside, San Bernardino, Imperial, Sacramento, Merced, Kings, Monterey, Salinas, Pasadena, Solano, Napa, Sonoma, Kern, Fresno, Contra Costa, Humboldt, and Marin. At these "Association Nights," informative discussions are had upon Association and county questions that are of vital interest to every doctor.

These meetings serve also to cement our constituent units into a state organization with common interests and purposes with central headquarters. Their value is further evidenced by our increased membership, sustained county activity, and interest and live-going units.

In addition, your secretary has attended and participated in meetings of: State Tuberculosis Association; State Safety Council; American Legion; Golden Gate International Exposition; Young Women's Christian Association; Annual conference of State Secretaries; Parent-Teachers Association; Association of American Medical Colleges; State Hospitals Association; State Nurses Annual meeting. Every opportunity was embraced to develop good will and cooperation with these several influential groups. Many citations could be made of the value of these contacts which are self-evident.

(j) *Association Headquarters.*—These are the headquarters of every member, and your secretary seeks to cause it to so serve. Official records are carefully kept and important data are secured and made available for reference. A daily average of one hundred letters are received and answered. An average of six personal interviews per day are had with members, students, visiting doctors, and lay persons. Some days as many as fifteen persons have called. These visits are welcomed and establish a central office, where dependable information may be secured. Likewise, many telephone calls of inquiry are answered each day. No effort is made to tabulate the number of these letters, visits, or telephone inquiries, which amount into the thousands and consume the time of all the office personnel.

Appreciation is sincerely expressed for the loyal, devoted services of all the office personnel. They have been faithful to the duties imposed upon them.

RECOMMENDATIONS

The following recommendations, or rather suggestions, merit consideration and decision.

1. The designation of a central meeting place where adequate accommodations and facilities are available to meet the needs of the annual sessions merits investigation and report to the House of Delegates at a future date.

2. More aggressive action to acquire a permanent endowment fund.

3. That consideration be again given to the acquiring of a permanent headquarters owned by the Association. It may be possible to finance such purchase with the use of a minimum of reserve funds and a Federal Housing loan over a period of ten or fifteen years. Our Association should be housed in permanent headquarters.

CONCLUSION

It can be confidently affirmed that the Association's house is well in order. As an organization, its purposes and policies are sound and consistent. Those who are vested with stewardship and administration have met up to the responsibilities reposed in them, and justifiable pride may be expressed by reason of the record made during the past year and the consummation of constructive endeavor. With confidence instilled by all that the past has wrought, the prediction is warranted that the coming year will witness still greater progress, further reaching expanding activities, and a leadership that will redound to glory of the membership and of benefit to the citizens of California and to the members of the Association.

In concluding this report, your secretary desires to express his deep appreciation for the assistance, consideration, and guidance accorded him by the House of Delegates, the Council, and the membership at large. I am sincerely grateful for having the privilege to serve, which I have sought to do to the best of my ability, and for the best interests of all.

Respectfully submitted,

Frederick C. Warnshuis, *Secretary*.

REPORT OF THE EDITOR

To the President and the House of Delegates:

The editor's report on papers received, printed, awaiting publication, or declined, is as follows:

(a) *Report on papers of the annual session at Del Monte, May, 2-6, 1937:*

At last year's annual session a total of 152 papers were read before the general meetings and different sections.

A summary of the disposition of the papers read at that year's annual session is as follows:

Del Monte annual session papers published in 1937.....	25
Del Monte annual session papers published in 1938.....	13
Del Monte annual session papers read, but published elsewhere, declined or not sent in.....	66
Del Monte annual session papers in CALIFORNIA AND WESTERN MEDICINE files still awaiting publication (annual session papers in this April issue to be deducted)	48

Total annual session papers read at Del Monte.....152

(Note: Del Monte annual session papers to appear in the May issue will further reduce the list of unpublished papers.)

(b) *Report on special articles which have been printed in CALIFORNIA AND WESTERN MEDICINE during the period April, 1937 to April, 1938 inclusive:*

Special and original articles which were published in CALIFORNIA AND WESTERN MEDICINE during the past year (April, 1937 to April, 1938 inclusive) are as follows:

Section papers from annual session at Coronado, 1936....	19
Section papers from annual session at Del Monte, 1937....	38
Papers read before general sessions at Del Monte, 1937..	4
Lure of Medical History articles.....	15
Papers read before county and other medical societies..	3
Papers accepted from miscellaneous sources (original articles, abstracts of speeches, reprints from other publications, etc.)	18
Clinical Notes and Case Reports.....	30
Editorials	51
Editorial Comment articles.....	39
Beside Medicine symposia.....	12
Special articles.....	80

Total papers published during past year.....309

(c) *Report on manuscripts in CALIFORNIA AND WESTERN MEDICINE files and awaiting publication in April, 1937, and later issues:*

Unpublished papers from annual session at Del Monte (not counting papers to appear in May issue).....	48
Unpublished papers read before county and other societies	2
Unpublished papers not read before other societies.....	13
Lure of Medical History articles.....	9
Clinical Notes and Case Reports.....	25
Editorial Comment articles.....	20
Beside Medicine symposia.....	4

Total manuscripts on hand, awaiting publication.....121

(d) *Report on non-annual session papers submitted:*

A total of thirty-three papers from county societies and other sources, which were submitted for publication in CALIFORNIA AND WESTERN MEDICINE during this past fiscal year (April, 1937 to April, 1938 inclusive), could not be accepted for various and special reasons.

Non-annual session papers submitted, but declined..... 33

Comment.—During recent years the official publications of the constituent state medical associations of the American Medical Association have been conforming, one by one, and more and more, to a pattern in which the organization work of the state and component county societies is receiving increased attention and space. The explanation for this is that the many medical-economic problems, which have been constantly coming to the front in recent years, have made it necessary for publication committees to respond to the interests of readers by supplying, in each issue, accurate information on community, state, and national public health and medical practice problems. This new outlook on state medical society journalism has necessitated a departure from the former somewhat stereotyped magazines containing some original articles and editorials on scientific subjects, with a limited amount of space for local items, and it is to the credit of the official journal of the California Medical Association that its founder-editor, the late Philip Mills Jones, some thirty-six years ago was among the first to sense these newer conditions that had thrust themselves upon medical practice. His *Journal of the Medical Society of the State of California* (former name of CALIFORNIA AND WESTERN MEDICINE) presented in general format the style now in use by our own and by an increasing number of state medical publications.

Your editor, naturally, is in full accord with the pattern and division of contents, which, for the last few years, has been found in each issue of CALIFORNIA AND WESTERN MEDICINE, and the members of the Publication Committee assume that the typographical and other set-up must be satisfactory as a desirable and convenient arrangement, since practically no criticisms or suggestions for change have been called to their attention. No apology is made for the space devoted to organization matters, because the understanding of medical-economic issues is today of paramount importance if the scientific interests of the profession and the public health responsibilities of the State are to be safeguarded and promoted. These facts are particularly pertinent in relation to the official journals of state medical societies.

However, in placing emphasis upon medical-economic and organization work, CALIFORNIA AND WESTERN MEDICINE has not neglected the promotion of scientific topics, and it is gratifying to know that the subject matter presented by contributing members measures up to standards that compare favorably with the best in medical literature, with especial reference to the interests and needs of physicians in general practice.

During the last year the experiment of supplements, to cover what are practically reference monographs, has been tried, and it is our impression that these additions to the regular issues have commended themselves to readers.

The sorrow that comes each year, with the advent of each annual session, is the realization that, owing to lack of space, so many of the more technical papers must be released for publication elsewhere. In a large society such as the California Medical Association, there is, however, no other alternative. Essayists who are on the annual session program, and whose papers are of a specialized

nature and who would prefer appearance in a technical journal, are requested to make early requests for release to print elsewhere.

In conclusion, the editor wishes to again thank contributors and the many members of the Association who have so generously responded when called upon for discussions, and other comment and aid. It is our continued ambition to have CALIFORNIA AND WESTERN MEDICINE reflect the highest credit upon the California Medical Association and its members.

Respectfully submitted,
George H. Kress, *Editor*.

REPORT OF THE LEGAL DEPARTMENT

To the President and the House of Delegates:

Events have moved rapidly during the past year, and an unusual number of legal matters have come before the Association since the last report of this department.

In order not unduly to extend this report, only a brief review of the more important phases of the past year's work will be undertaken.

Corporate Practice.—This department's reports for the years 1935 (CALIFORNIA AND WESTERN MEDICINE, May, 1936, page 412), and 1936 (Supplement to CALIFORNIA AND WESTERN MEDICINE, April, 1937, page 42), summarized the decisions in *Pacific Employers' Insurance Company vs. Insurance Commissioner*, and *Benjamin Franklin Life Insurance Company vs. Insurance Commissioner*. These cases, each decided by a District Court of Appeal, in our opinion firmly establish the California law to be that a corporation cannot directly or indirectly practice medicine or surgery. In addition to the foregoing cases, the legislature in 1937 enacted the Business and Professions Code, several sections of which codify the rule forbidding corporate practice of medicine. It is believed that these sections are of such vital importance to the medical profession that they ought to be quoted in full herein:

2006. The term "person" means a natural person when a right, privilege or power is conferred by this chapter upon a person.

2007. The term "professional" relates to the art and science of medicine and surgery and to such other arts and sciences as may be included within the field of medicine and surgery.

2008. Corporations and other artificial legal entities have no professional rights, privileges or powers.

These three sections are, in effect, a legislative declaration of the public policy which forbids corporations to practice by any means the profession of medicine and surgery.

There is now pending before the California Supreme Court an action entitled *People of the State of California on the Relation of the Board of Medical Examiners vs. Pacific Health Corporation*. In this case the Attorney-General has taken the position that the activities of the Pacific Health Corporation constitute, in effect, the practice of medicine by a corporation. Acting pursuant to direction of the Council, we prepared an exhaustive brief upholding the position of the Attorney-General and filed it with the Supreme Court. The court took the matter under submission several months ago, and early in January set aside its order of submission, stating that no four members of the court could agree upon a decision. The case is now again on the calendar for oral argument. The Pacific Health Corporation has argued that its activities do not infringe upon the rule of law forbidding the corporate practice of medicine. The corporation's brief before the Supreme Court contains the statement that:

We do not contend that a corporation can actually or legally practice medicine or any other profession.

In other words, the corporation candidly states that it would be illegal for it to engage in the practice of medicine or surgery.

County Hospitals.—During the past year this department has endeavored to be of full assistance to the special committee on county hospitals, of which Dr. Louis A. Packard is the chairman, and your General Counsel has attended several meetings of this committee, held in San Francisco and Los Angeles. Many legal problems have

arisen in connection with this subject, some of them of such a complex nature that a great deal of time has necessarily been spent by the committee and the Council in their consideration.

Proposed Basic Science Law.—Acting pursuant to instructions of Dr. George H. Kress, General Chairman of the Committee on a Basic Science Law, this department reviewed in detail the various drafts of a proposed initiative and prepared for the members of the Council and the committee a detailed memorandum discussing and explaining all of the legal points which appeared to us to be necessarily involved in the proposed basic science initiative. At the present time this department is, pursuant to instructions, working upon a proposed constitutional amendment to be discussed and possibly submitted to the legislature at its next session. It is believed that in a short time it will be possible to submit to the committee a preliminary and tentative draft of a proposed constitutional amendment which will include all of the provisions which have been agreed upon as necessary in any workable basic science legislation.

Los Angeles County Medical Association By-Laws.—Some time ago it was determined by the Los Angeles County Medical Association to revise its by-laws in order that they might be more appropriate for government of the largest component county society. Dr. Edward M. Palette, Chairman of the Committee on Revision of the By-Laws, requested your General Counsel to assist it in its labors. Inasmuch as the Los Angeles County Medical Association is an incorporated organization, there were a number of technical legal problems confronting the Committee on Revision of the By-Laws. The magnitude of the task which confronted this committee is difficult to describe and cannot be visualized unless one has had personal experience in similar undertakings.

Therefore, it is believed that the excellent code of by-laws which resulted from the labors of the committee, with the legal assistance of this department, is one of the most important and at the same time more satisfactory accomplishments of the past year.

Medical Jurisprudence Column.—As stated in the report of this department last year, a column in CALIFORNIA AND WESTERN MEDICINE, entitled "Medical Jurisprudence," was created by the Council in 1936. During the past year, articles on medical, legal, and other topics of interest to the medical profession have been prepared for this column. The articles in Medical Jurisprudence have been selected from among the subjects which have tentatively been decided upon for inclusion in the proposed Physicians' Handbook. It is the intention of your General Counsel that in the near future a preliminary draft of the Physicians' Handbook may be prepared, using much of the material that has appeared from month to month in the Medical Jurisprudence column. Comments and suggestions of members of the Association, with respect to this column and to the Physicians' Handbook, are cordially invited.

Physicians' Handbook.—As stated under the previous heading, the contemplated Physicians' Handbook is in process of preparation. Your General Counsel, Secretary-Treasurer, and Editor are endeavoring to carry out the directions of the Council and to that end have prepared a tentative outline of the subjects to be included in the handbook and, as above stated, various preliminary drafts of particular subjects have been prepared and printed in CALIFORNIA AND WESTERN MEDICINE, under the heading "Medical Jurisprudence."

Workmen's Compensation Case.—The Council, at its fall meeting, authorized your General Counsel to appear before the California Supreme Court in an action entitled *Pacific Employers' Insurance Company vs. Industrial Accident Commission and Kenneth Tator*. Pursuant to the Council's authorization, your General Counsel and Mr. Howard Hassard, one of his associates, appeared before the Supreme Court during oral argument of the case and subsequently prepared and filed a written memorandum of points and authorities on behalf of several physicians who had rendered professional services to Kenneth Tator. This proceeding involved the following question: Where an employee employed in Massachusetts by a Massachusetts employer is injured while temporarily in California on a special job for the employer, and is treated by California

physicians, can the injured employee recover compensation and the physicians a reasonable fee for their services in California, or must both the injured employee and his physicians proceed therefor in Massachusetts? Before the Supreme Court this department argued that it would be against the public policy of this State to require its physicians to go elsewhere to recover the reasonable value of their services. The Supreme Court, speaking through Mr. Justice Douglas L. Edmonds, agreed with our position and decided the case in favor of the injured employee and his attending physicians.

Malpractice Insurance.—Early last fall a number of different types of Lloyd's of London malpractice insurance policies were being issued throughout the State to members of the Association. The legal department received literally hundreds of inquiries from Association members with respect to Lloyd's of London and malpractice insurance generally. A preliminary investigation established that there were at that time at least thirty different kinds of malpractice insurance contracts being issued in the name of Lloyd's of London and that no two of these contracts were alike, some being adequate as to legal form and others obviously affording incomplete protection to the insured.

At the same time requests for assistance were received from several county societies, and in endeavoring to aid these societies, particularly the San Francisco County Medical Society, a model form of Lloyd's of London malpractice insurance policy was eventually prepared.

At the request of the Executive Committee of the Council, a further survey of the entire malpractice field was made and a formal report was presented to the Council at its meeting of January 15, 1938. In this report a brief résumé of the American insurance companies writing malpractice insurance was made and a detailed review of the various surplus line brokers representing underwriters at Lloyd's in London was presented. Since that report your General Counsel has been informed that one of the few American companies writing malpractice insurance has retired from the field. Your General Counsel has also recently been informed that the surplus line brokers in California through their own association have agreed to adopt the Lloyd's of London policy form prepared and approved by this department, and it is said to be their intention to use it exclusively so that in the future all Lloyd's of London malpractice insurance policies will be uniform. It is to be hoped that this information is accurate and will prove to be the fact.

The tremendous amount of research and correspondence carried on by the legal department in the past year on the subject of malpractice insurance is difficult to summarize in this report. Your General Counsel has been requested to, and will, present a full report on this subject to the House of Delegates at its first meeting at Pasadena. Interested members of the Association are also referred to the various reports on malpractice insurance which have been published or will be published in *CALIFORNIA AND WESTERN MEDICINE*, the *Bulletin of the Los Angeles County Medical Association*, and the *Bulletin of the San Francisco County Medical Society*.*

Miscellaneous.—During the past year, opinions have been requested and furnished dealing with such subjects as California Unemployment Reserves Act, the legal and ethical aspects of certain types of group medical practice, the legal scope of the practice of chiropractic, the legal status of methods of operation of county hospitals in effect in several of the counties, and many other subjects. Under instructions from the Council, this department has undertaken the defense of physicians who have been sued for damages as a consequence of testifying in a criminal prosecution based upon the alleged unlawful practice of medicine.

Attendance at conferences of officers at meetings of the Council, Executive Committee, and other standing and special committees, has been maintained throughout the year.

Members of this department have also enjoyed meeting with the members of a number of the county societies, where matters of legal import were considered.

Respectfully submitted,

Hartley F. Peart, *General Counsel*.

II

REPORTS OF DISTRICT COUNCILORS

FIRST COUNCILOR DISTRICT

Imperial, Orange, Riverside, San Bernardino, and San Diego Counties

To the President and the House of Delegates:

Annually each councilor is expected to report to the President and the House of Delegates regarding conditions pertaining to medicine and surgery in his district.

The First Councilor District is third in number of members and first in geographical boundaries. The counties of Imperial, San Diego, Orange, Riverside, and San Bernardino comprise the First Councilor District.

There have been no serious problems before the members of this district during the past year. County Hospital admissions and management have been quite satisfactory to all concerned. The sick and needy have been well cared for by the medical fraternity, and as far as I can gather from many individual contacts, all the men have had a more profitable year than the previous one. Hospital insurance carriers have not invaded the First District to any degree. Each county has seen many new and young men enrolled in the county societies. Few desirable men remain out of the county societies' enrollments.

The State officers, President-Elect Roblee, Speaker of the House of Delegates, Lowell Goin, and Secretary Warnshuis, have visited all the county societies at regular or called meetings and have given them very profitable talks on society matters which ended in round-table discussions for all present.

Postgraduate courses have taken on an added interest this year as evidenced by the Riverside meeting held on February 14. The men are interested in the clinical presentation of the various subjects. The Orange County Postgraduate Conference will be held on March 15 at 4 p. m. at the Ebell Club in Santa Ana. The San Bernardino conference will follow on April 7 at 4 p. m. at the Elks Club in San Bernardino.

Respectfully submitted,

Calvert L. Emmons, *Councilor*,
First District.

SECOND COUNCILOR DISTRICT

Los Angeles County

To the President and the House of Delegates:

During the past year steady progress has been made in the growth of the Los Angeles County Association.

The outstanding accomplishment was the drafting and adoption of a new constitution and by-laws. These represented many hours of unselfish labor on the part of the committee which had charge of the revision. In several respects they radically changed our former set-up.

For many years the specialty sections and the geographical branches have had representatives on the Board of Councilors. Because of the great disparity in membership in these various groups, it was realized that this caused definite inequalities of representation. It also made for a rather large deliberative body. A further difficulty arose from the fact that many of these representatives were elected for only one year, with the inevitable result that the greater part of their term of office was occupied in becoming familiar with the organization machinery.

In order to remedy these defects, a Council of twenty-one members has been created, each holding office for a period of three years, their terms being staggered so that seven new members are elected each year, thus making for a preponderance of experienced men and insuring continuity of policy.

Similarly, the five members of the Board of Trustees hold office for five years, with a change of one member each year. It is felt that the longer terms of office for the trustees are in keeping with the financial responsibility which devolves upon this Board.

The by-laws provide for the creation of twenty-one committees, each committee designed to study a present-day problem. It is also the idea that these committees will afford an opportunity for many members to become familiar with our problems and in this way new blood will be constantly introduced and be available for the administrative

* See *CALIFORNIA AND WESTERN MEDICINE*, February, 1938, on page 148, and March, 1938, on page 226.

work of the organization. Several of these new committees are already extremely active.

The other outstanding feature of the by-laws is the incorporation in its entirety of the recently adopted disciplinary code of the California Medical Association.

The effect of these changes will be greatly to increase the efficiency and smooth working of the organization.

Respectfully submitted,

Carl R. Howson, *Councilor,*
Second District.

THIRD COUNCILOR DISTRICT

Kern, San Luis Obispo, Santa Barbara, and Ventura Counties

To the President and the House of Delegates:

The councilor of the Third District has made the customary visits to the component societies. In addition, Santa Barbara, Ventura, and San Luis Obispo counties were hosts at special meetings to President-Elect Roblee and Secretary Warnshuis. Kern County was visited, at its annual banquet, by Doctors Roblee, Goin, and Warnshuis.

All societies in the district are functioning in excellent condition. The San Luis Obispo County Society is especially to be commended for the manner in which it handled its county hospital crisis.

The first postgraduate conference in the district was arranged for March 12 and 13 at Santa Barbara. The committee responsible for this conference is to be congratulated for the work done in its preparation and the excellent program arranged. In spite of various stormy weather there were 110 registered, which exceeded the expectation. The District is already looking forward to next year's conference.

Respectfully submitted,

Louis A. Packard, *Councilor,*
Third District.

FOURTH COUNCILOR DISTRICT

Fresno, Madera, Kings, Tulare, Merced, Mono, Mariposa, Inyo, Calaveras, San Joaquin, Tuolumne, and Stanislaus Counties

To the President and the House of Delegates:

Adjustment of some difficulties among members attending Council meetings, promotion of postgraduate conferences and Woman's Auxiliary activities, visits to county medical societies, meetings with the Farm Bureau and other lay organizations in the interest of our organization, and committee work on the County Hospital problem, were some of the activities by which the Councilor has tried to serve the district and the California Medical Association during the past year.

The attention of the membership has been pointedly directed to the importance of conscientious observance of the ethics of the profession and avoiding those errors in department which may furnish pretexts for malpractice suits. Adequate professional liability insurance has been a matter of much concern, in view of the alarming increase of suits. The standard form of policy developed by the California Medical Association's legal department and furnished by acceptable underwriters has been explained as offering the best solution of this problem at present.

An expression of majority opinion from constituent societies on expenditures in connection with the proposed basic science initiative was obtained and voted in the Council.

Some progress is being made in the spread of voluntary insurance in this district, but not in sufficient volume as yet to encourage the belief that it will to any great extent solve the problems of our needy sick. Other means to supplement voluntary insurance seem required in this district to offset the ever growing demand of taxpayers and nonindigents for the privilege of hospitalization in tax-supported institutions.

This being the year of another general election, the continuous interest in candidates for county supervisors and members of the legislature has been urged on the membership, and the need of hearty cooperation with our organizations of defense against measures designed to obstruct medical research and practice has been brought to the attention of our county societies.

The profession in general throughout the district is in full accord with the activities of the California Medical

Association and is rendering excellent medical service, much of which is donated to the public, and is supporting public health measures that are constantly encroaching on the field of medical practice.

Respectfully submitted,

A. E. Anderson, *Councilor,*
Fourth District.

FIFTH COUNCILOR DISTRICT

Monterey, San Benito, San Mateo, Santa Clara, and Santa Cruz Counties

To the President and the House of Delegates:

There have been several instances of notable achievement by the county medical societies in the Fifth Councilor District during the past year. Coöperating with the California Tuberculosis Association, the members of the San Mateo County Society have made possible more extensive school surveys which in themselves have proved valuable and are a means of furthering the effort toward control of tuberculosis in that county. A similar program has been started in Santa Cruz County and has already made progress.

Santa Clara County Medical Society has adopted basic principles for the coordination of its members and the County Hospital in the venereal disease campaign.

San Benito County Medical Society has expressed great interest in a proposed postgraduate program in this district in the near future.

All county societies in the district have been visited at least once, and plans have been made for additional visits with our State Secretary before the annual meeting.

Respectfully submitted,

Alfred L. Phillips, *Councilor,*
Fifth District.

SIXTH COUNCILOR DISTRICT

San Francisco County

To the President and the House of Delegates:

The major interest of the members of the Sixth District during the past year has been further study of health and hospital insurance and a thorough study of malpractice insurance.

In the matter of health and hospital insurance our particular efforts have been directed toward working out a plan which will provide a health service for the municipal employees of San Francisco. After many conferences, and after destructive criticism of certain plans, and after the presentation of three plans of our own, we have finally agreed upon one which, we feel, assures proper service to the insured by a physician of the insured's own choice and will, after the first year of operation, give reasonable compensation to the physician for that service.

The subject of malpractice insurance was very carefully surveyed by a committee, of which Dr. Philip K. Gilman is chairman and to which our legal counsel, Hartley F. Peart, was adviser. This has been an outstanding piece of work, and as a result a very satisfactory policy was made available just at the time when another major company withdrew from the field.

We feel that real progress has been made in our district this year.

More detailed reports on the above activities appear in CALIFORNIA AND WESTERN MEDICINE.

Respectfully submitted,

Karl L. Schaupp, *Councilor,*
Sixth District.

SEVENTH COUNCILOR DISTRICT

Alameda and Contra Costa Counties

To the President and the House of Delegates:

The Alameda County Medical Association has held ten regular meetings during the year, with scientific programs prepared and presented, in large measure, by our membership. One visiting speaker was included.

The Alameda County Medical Association shows steady increase in membership, and the past year, like the years preceding it, has added forty-two members to our number, twenty-nine of which were elected to regular membership, and thirteen to junior associate membership. The Association lost, through resignation, death, and failure to pay

dues, twenty-four members during the year, leaving a net gain of sixteen members.

During the year our Council was honored by a visit from Dr. Olin West, Secretary of the American Medical Association, and a special luncheon meeting was held for Doctor Leland, Director of the Bureau of Economics of the American Medical Association.

Progress can be reported in the development of our Hospital Insurance plan. The project is now fifteen months old, and during that period has shown a uniform and highly satisfactory growth in the number of policyholders and in more perfect understanding of the underlying problems by those entrusted with its management. One important feature has been the opening of the plan to members of the families of the present policyholders, on a financial basis which makes it highly attractive. The premium of the original policyholders is ninety cents, that of the spouse eighty cents, and each dependent child forty cents. This is a long step toward making the plan popular and a satisfactory solution of the problem of the general public in paying hospital costs. The plan is operating in four counties, and has added to its personnel an advisory committee of outstanding lay citizens from each of the four counties. The enthusiasm of this group is most encouraging to all interested in the success of the project.

Contra Costa County has joined with Alameda County in the Hospital Insurance plan, and is progressing as well as could be expected at this time. The Contra Costa Medical Society's regular meetings are well attended, and there are but few eligible men in the county who are not members of the Society.

Respectfully submitted,

O. D. Hamlin, *Councilor,*
Seventh District.

EIGHTH COUNCILOR DISTRICT

Alpine, Amador, Butte, Colusa, El Dorado, Glenn, Lassen, Modoc, Nevada, Placer, Plumas, Sacramento, Shasta, Sierra, Sutter, Tehama, Yolo, and Yuba Counties

To the President and the House of Delegates:

During the first half of the present term, Dr. C. E. Schoff served as councilor for this district, and during this period he and several of the California Medical Association officials have made visits to many of the local societies. Doctor Schoff reports that all the meetings were well attended, and that the scientific programs were well presented.

The only accomplishment during my short term has been the reestablishment of the Intercoast Hospitalization Insurance Association on the approved list of the California Medical Association. The controversial points have been cleared away and perfect understanding now exists.

Respectfully submitted,

F. N. Scatena, *Councilor,*
Eighth District.

NINTH COUNCILOR DISTRICT

Del Norte, Humboldt, Mendocino, Lake, Marin, Napa, Solano, Sonoma, and Trinity Counties

To the President and the House of Delegates:

The hardest part of the year's work is preparing the councilor's annual report, as it is impossible to set forth the amount of work accomplished in the various society visits and the multiplicity of details attended to in such a brief report.

It is gratifying to see the intense interest the members of the county societies now take in the activities of organized medicine, as against the apathy and general spirit of do nothing that existed when I first began making councilor visits some years ago. Whether this intense interest is due to the present type of editorials in the JOURNAL, the annual Secretaries' Conference, or the present unrest, is hard to analyze, but I believe the annual mid-year Secretaries' Conference is producing results.

During the past year I have attended all Council meetings, visited all of my societies but one, and to the best of my ability promoted the interest of organized medicine in this district.

Respectfully submitted,

Henry S. Rogers, *Councilor,*
Ninth District.

III

REPORTS OF COUNCILORS-AT-LARGE

To the President and the House of Delegates:

During the past year we have attended a number of meetings having to do with the activities of the Association.

The Secretaries' meeting was well attended, and I was impressed with the interest which members of the profession, from one end of the State to the other, are taking in matters pertaining not only to scientific medicine, but to economic phases of the practice of medicine. This increased cooperation on the part of many physicians who formerly took only a casual interest in the work of organized medicine, should be reassuring to all of us.

Respectfully submitted,

W. H. Kiger, *Councilor-at-Large.*

To the President and the House of Delegates:

All of the meetings of the Council have been attended, and an attempt has been made to acquaint the local society with what is going on throughout the State.

Respectfully submitted,

C. O. Tanner, *Councilor-at-Large.*

To the President and the House of Delegates:

Circumstances beyond control and of professional moment to me prevented my attending the last annual session and the meeting of the Council in January, 1938. All other meetings of the Council recorded my attendance. In official capacity, I have attended numerous conferences and hearings that dealt with activities of the city employees of San Francisco, designed to establish a health service for this group.

I have also attended many meetings of the Advisory Committee to the Hall of Science of the Golden Gate International Exposition.

Considerable time has also been devoted to the work of the Legislative Committee and to matters related to malpractice insurance.

Respectfully submitted,

T. Henshaw Kelly, *Councilor-at-Large.*

To the President and the House of Delegates:

As councilor-at-large my time has been almost wholly occupied by duties of the Committee on Public Policy and Legislation. Talks on legislation and legislative trends have been given, both at home and at the neighboring component societies, in company with Dr. F. C. Warnshuis, as he made his visits to the county groups.

Respectfully submitted,

Junius B. Harris, *Councilor-at-Large.*

To the President and the House of Delegates:

Our president and our secretary and councilors who preside over councilor districts will, without doubt, report of their activities, with inadequate emphasis on the time which they have given to the California Medical Association.

This Councilor would invite the attention of the members of the Association to the extraordinarily full cooperation of all Association officers.

Special meetings have been attended, on short notice, and without complaint.

Committee work has been undertaken and completed with care and precision.

Regular meetings have been fully attended.

The interest, energy, and loyalty of all your officers are commended to your attention.

Respectfully submitted,

M. R. Gibbons, *Councilor-at-Large.*

To the President and the House of Delegates:

It has been my privilege, during 1937, as a councilor-at-large, to assist in bringing about an agreement between the Board of Directors of the Associated Hospital Service of Southern California and the medical profession, acting

through the Los Angeles County Medical Association, which eliminated the chief difference in policy and procedure that constantly occurs when lay-controlled organizations enter into the rendering of a professional, or semi-professional, service.

In this instance the fine spirit of coöperation on the part of the representatives of the Associated Hospital Service of Southern California brought about the elimination from their contracts and certificates of agreements to render any and all professional services, including laboratory and x-ray procedures. This agreement follows the definition of the House of Delegates of the American Medical Association as to what constitutes hospital service and, in my opinion, is the only safe method whereby prepayment of hospital service, where solicitation of the beneficiaries occurs, may be carried on that should receive the approbation and support of the medical profession without the danger of encroachment upon professional privilege by lay corporations.

As your councilor-at-large I have maintained a constant affiliation with other groups in the community in order that I might bring a comprehensive knowledge and viewpoint into the meetings of the Council, to assist in the answering of our continuously changing problems. The immediate future will present problems that concern the medical profession in their relationship to the public that will require a broad and deep understanding of the trend of the times in order that we attempt to adjust our relationship on a basis that will permit us to continue to serve, free from restrictions and interference that would decrease the quality of service that is the motivating ideal of every man in the medical profession.

Respectfully submitted,

Harry H. Wilson, *Councilor-at-Large*.

IV

REPORTS OF STANDING COMMITTEES

EXECUTIVE COMMITTEE

Karl L. Schaupp, Chairman

Howard Morrow, President.
William W. Roblee, President-elect.
Edward M. Pallette, Past President.
Lowell S. Gohn, Speaker, House of Delegates.
Morton R. Gibbons, Chairman of the Council.
Karl L. Schaupp, Chairman, Auditing Committee.
Charles A. Dukes, Chairman, Committee on Public Relations.
Frederick C. Warnshuis, Secretary-Treasurer.
George H. Kress, Editor.

To the President and the House of Delegates:

The Executive Committee of the Council has met monthly during months for which Council meetings were not scheduled.

The Executive Committee concerns itself with Association policies and work and indicates action as questions arise concerning the Association's interests. Nine officers and councilors contribute their time and judgment in establishing supervision of Association matters.

Thus, questions and representations are promptly considered, eliminating delay and expediting prompt action to the advantages of all members.

Digests of its meetings are published, and at each Council meeting action is taken to cause the minutes to become part of the Council's record.

The Executive Committee diligently seeks to discharge its duties, and account for its stewardship.

Respectfully submitted,

Karl L. Schaupp, *Chairman*.

AUDITING COMMITTEE

Executive Group

Karl L. Schaupp, Chairman
O. D. Hamlin
T. Henshaw Kelly

To the President and the House of Delegates:

In compliance with the provisions of the by-laws, we shall submit a draft of the 1938-1939 budget at the opening session of the House of Delegates.

Respectfully submitted,

Karl L. Schaupp, *Chairman*.

COMMITTEE ON ASSOCIATED SOCIETIES AND TECHNICAL GROUPS

Executive Group

John V. Barrow, Chairman, 1940
Edwin L. Bruck, 1938
W. H. Geistweit, 1939

To the President and the House of Delegates:

The work of the committee has been done chiefly by correspondence. Each member has been asked to render a report to be incorporated in the committee report. The dentists, the druggists, and certain officers of the Bar Association, together with an important insurance company, have all been contacted regarding a campaign for the listing of voters.

The plan involves the listing and classification of the physicians of the State Medical Association. These groups will contain from ten to thirty, as convenience dictates. A leader, responsible to the County Association, will have direct telephone contact with each member. Each physician will be requested to furnish names and addresses of his patients who, by virtue of their confidence in him, will support the legislative measures that our State Association recommends. This method alone will yield better than 500,000 votes. The Woman's Auxiliary has signified its willingness to make these listings through our county medical associations. This entails an enormous amount of work, which they are capable and happy to do.

Not many letters need to be mailed, but the one final request direct to the voter must be signed by the physician himself. Whether these letters are mailed through the county medical associations, or the State Medical Association office, or the League of Public Health, is for the determination of the Council. We particularly request the approval of the Council for the Auxiliary coöperation in this matter. The same organization can be accomplished in the allied organizations without forming any legal tie-up.

Doctor Geistweit of San Diego has done much work with the local pathologists and other physicians in the matter of the new law licensing laboratory workers. He recommends a more careful and thorough study of this situation than has been given heretofore. He has also done some work in the line of his convictions that there should be a much stronger law licensing nurses, in which matter he recommends that that subject be studied by our committee.

Locally, and in matters of the State, we have coöperated with the Auxiliary with the greatest pleasure and our best ability.

Respectfully submitted,

John V. Barrow, *Chairman*.

COMMITTEE ON HEALTH AND PUBLIC INSTRUCTION

Executive Group

Fred B. Clarke, Chairman, 1938
W. R. P. Clark, 1939
Benjamin W. Black, 1940

To the President and the House of Delegates:

It is quite apparent to the members of this particular Standing Committee that progress in the field of public health education is dependent upon persistent persistency. Your committee is also of the opinion that visualization of a subject or health fact is the most effective means of educating the public upon health matters.

Your committee has, through the offices of the State Secretary, pursued such a course during the past year. Several series of from three to six public lectures have been arranged for Y. W. C. A. groups, Women's Clubs, and High Schools. Gratifying expressions of appreciation have been received in return.

Some twenty-two lectures have been arranged for other lay groups during the past year. These engagements have inspired other groups to sponsor public meetings and enabled the making of new contacts that will record an expanding program of public education which can be assured by persistency in follow-up work.

Your committee deplors the lack of interest and coöperation on the part of county society members in this program of public education. Lack of interest is also manifested by many local health officers. Except for three or four exceptions, county societies and health officers are wholly disinterested. This lack of interest and seeming unwillingness on the part of members to prepare talks on health questions

and accept engagements to address lay meetings materially delays and limits the work of this committee.

Your committee respectfully submits the following recommendations:

1. That the House of Delegates direct each county unit to sponsor two or more public meetings each year, under the direction of a special local committee charged with this duty.

2. That these county committees be requested to enroll from their members a speakers' group and submit their names and subjects to the State Secretary. Members of these groups to be assigned to address lay meetings in their immediate vicinity.

3. That county or local health officers be requested to take suitable steps to sponsor and support public meetings for the purpose of public health education.

Respectfully submitted,

Fred B. Clarke, *Chairman*.

COMMITTEE ON HISTORY AND OBITUARIES

Executive Group

Frank R. Makinson, Chairman, 1938
A. Elmer Belt, 1940 J. Marion Read, 1939
The Secretary, ex officio The Editor, ex officio

To the President and the House of Delegates:

The committee met once during the year. The meeting was held in San Francisco in October, 1937, when all the members were present. The work that had been accomplished was reviewed, but special attention was given to formulating a plan embracing the entire State.

It was considered advisable to suggest to the Council that the committee be enlarged and divide the State into districts so that one member of the committee would be responsible for obtaining the history in his particular district.

Death notices and obituaries were to be obtained and forwarded to CALIFORNIA AND WESTERN MEDICINE, which has been satisfactorily carried out.

Requests were to be made of various public libraries of the State to set aside, in a place reserved for such, all books and articles pertaining to California medical history.

It is urged that a county historian be appointed by each component county unit; this has been done in several instances. A splendid appeal was made recently by the editor of CALIFORNIA AND WESTERN MEDICINE along this line. A great deal has been accomplished toward collecting the history of the Association, but a still larger portion remains unfinished; yet satisfactory progress can be reported.

Appended hereto is a list of members who during the last year have been called from earthly labors to have their names recorded in the roster of the Chapter Eternal.

Respectfully submitted,

Frank R. Makinson, *Chairman*.

IN MEMORIAM

Alexander, Edgar William, July 21, San Francisco.
Alvarez, Luis Fernandez, May 24, Los Angeles.
Attwood, William Gillispie, July 14, Los Angeles.
Baker, Charlotte LeB. Johnson, October 31, Point Loma.
Ball, Charles Dexter, June 16, Santa Ana.
Barlow, W. Jarvis, September 4, Los Angeles.
Beck, John Edwin, April 8, Tulare.
Bell, Mabel T., September 27, Ventura.
Bennette, Marie Antoinette, July 27, San Bernardino.
Bowen, Fred Phelps, October 9, Los Angeles.
Brem, Walter Vernon, November 19, Los Angeles.
Brown, Harry V., June 26, Glendale.
Brown, Newbern N., May 30, Bakersfield.
Busby, James L., February 23, Pasadena.
Carey, Henry Benjamin, February 4, San Francisco.
Clark, John I., November 3, Santa Ana.
Coe, Harry Carson, June 11, Oakland.
Denman, Claire H., January 12, Berkeley.
Downs, Alfred J., March 12, Los Angeles.
Dunlap, Albert Knight, January 19, Sacramento.
Eddy, Irving Herbert, March 8, Glendale.
Ellis, James A., May 1, Alameda.
Farmer, Lydia Etta, July 1, Folsom City.
Fehlman, William Edward, November 24, Santa Cruz.
Friedman, Joseph C., October 20, Banning.
Gatchell, Willis LeForrest, December 31, Stockton.
Grist, David Garrison, February 3, Los Angeles.
Goodridge, Hannah A., October 26, San Jose.
Gray, Frank Pierce, June 28, San Francisco.

Green, Louis David, January 14, San Francisco.
Grissim, John D., July 22, Oakland.
Gross, Harold G., October 28, Eureka.
Hay, Emil O., October 15, Los Angeles.
Haynes, John Randolph, October 30, Los Angeles.
Heffernan, William T., December 30, San Diego.
Howell, Edgar Henry, December 30, San Francisco.
Hull, Leonard Charles, November 23, Hollister.
Jones, Charles Breckenfeld, March 14, Sacramento.
Kehr, Edwin Frank, October 31, Pasadena.
Kern, Bert C., September 5, Jackson.
Lenker, Walter Dora, January 30, San Bernardino.
Mabee, Melbourne, March 23, Santa Ana.
Martin, James J., March 23, Long Beach.
Miller, Frank W., November 1, Los Angeles.
Miller, Harold A., August 13, Alameda.
Minaker, Andrew J., January 16, San Francisco.
Millsbaugh, Willard P., October 29, Los Angeles.
Moffitt, Thomas William, January 4, Hollywood.
Mountford, George Thomas, May 2, Coalinga.
Newmark, Philip, August 20, Los Angeles.
O'Connor, Thomas C., Jr., January 13, Lodi.
Otis, Margaret R., September 21, San Francisco.
Peery, John Thomas, September 27, Corcoran.
Pruett, John F., March 17, San Francisco.
Rea, Thomas, December 1, Yreka.
Renz, Carl, January 22, Mill Valley.
Rook, Charles Wesley, April 15, Montrose.
Roth, George Henry, August 22, Los Angeles.
Seawell, J. Walter, December 26, Healdsburg.
Shidler, George F., September 12, Torrance.
Smith, Harlan Lewis, March 12, Fair Oaks.
Smith, Munford, June 28, Los Angeles.
Smith, R. Knight, April 18, San Francisco.
Solomon, Jacobus C., March 15, Los Angeles.
Spencer, John Campbell, July 4, Palo Alto.
Styan, William Earnshaw, November 24, San Francisco.
Sweet, Earl Bertrand, May 22, Los Angeles.
Sweet, Frank D., January 24, Long Beach.
Tomlinson, Richard Frank, March 13, San Francisco.
Trowbridge, Dwight Howe, May 4, Fresno.
Van Sickle, J. Russell, January 16, Santa Monica.
Wade, Lyman Trevitt, April 11, San Luis Obispo.
Wall, Albert Samuel, September 9, Los Angeles.
Webster, Oran Lamar, July 31, Holtville.
Wheeler, Joseph Sulz, July 23, Santa Cruz.
Zirker, Daniel Webster, October 25, Merced.

COMMITTEE ON HOSPITALS, DISPENSARIES, AND CLINICS

Executive Group

Daniel Crosby, Chairman, 1939
Karl L. Schaupp, 1940 George Dawson, 1938

To the President and the House of Delegates:

Although the year has been filled with many questions concerning hospitals, methods of conducting hospital insurance, and the like, nothing has come to the attention of this committee which required any action.

Most of the questions that have been given consideration have been considered by the Public Relations Committee.

Respectfully submitted,

Daniel Crosby, *Chairman*.

COMMITTEE ON INDUSTRIAL PRACTICE

Executive Group

Morton R. Gibbons, Chairman, 1938
Harry E. Zaiser, 1940 Philip Stephens, 1939

To the President and the House of Delegates:

Attention has been called in the official journal of the California Medical Association to the decision of the Supreme Court of California in the case of *Tator vs. Pacific Employers' Insurance Company*.

"The court, in its decision, established that the California Industrial Accident Commission has jurisdiction over all injuries arising in this State, even though the contract of employment was made in another state and even though the employee is only temporarily assigned to work in this State. This obviates any possibility of physicians being required to proceed in other states for compensation for services performed in this State to an employee injured in this State."

The American Medical Association has organized a Council on Industrial Health. There has been one organization meeting. Another will be held before the California Medical Association annual session.

It is not possible to publish a statement regarding the proposed activities and scope of this Council in this bulletin. However, it is probable that definite information may be available before May 9.

The San Francisco County Medical Society has taken measures to secure from the Industrial Accident Commission of California, by means of the facilities of the WPA, statistics on industrial accident practice, and compilation of experiences in that practice. The data to be sought is under consideration, and suggestions from interested members is solicited by the committee of the San Francisco County Medical Society.

Respectfully submitted,

Morton R. Gibbons, *Chairman.*

COMMITTEE ON MEDICAL DEFENSE

Executive Group

George G. Reinle, Chairman, 1938
Fred R. De Lappe, 1939 John P. Nuttall, 1940

To the President and the House of Delegates:

Your Committee on Medical Defense, by the authority of Chapter 5, Section 4, of the by-laws, appointed an Advisory Committee, consisting of Dr. Phillip Gilman, Dr. Stanley Mentzer, and Dr. Gordon MacLean, to assist it in the preparation of a report on malpractice in California.

This committee begs to submit to the House of Delegates of the California Medical Association the following report and recommendations:

The committee has been informed that a number of surplus line brokers were engaged in writing physicians' defense and indemnity insurance contracts on behalf of different groups of underwriters at Lloyd's in London, England. The committee also found that surplus line brokers are authorized by the California Insurance Code to issue contracts of insurance in any particular field after it has been determined by the Insurance Commissioner that less than 50 per cent of the authorized and admitted insurers doing the particular class of insurance business involved (in this case liability insurance) are refusing to issue insurance contracts of the type sought to be issued by the surplus line brokers.

With respect to those insurance companies authorized to transact a liability insurance business in the State of California, the committee found the following: the Medical Protective Company of Fort Wayne, Indiana, issues physicians' defense and indemnity policies to members of the California Medical Association only, at the rate of \$32 per annum and with a coverage of \$5,000 to \$15,000, but excludes the following:

- (a) Most surgery, unless done in an emergency;
- (b) Any liability growing out of the ownership, operation and supervision of any x-ray equipment for therapeutic work; or
- (c) Any liability arising out of the ownership, operation, and supervision of any hospital, sanitarium or clinic, or any business enterprise. Upon payment of a premium of \$48 per annum the company will remove the surgery restriction.

In other words, a surgeon must pay \$48 per year for coverage of \$5,000 to \$15,000. It appears that the Medical Protective Company will insure against liability arising from the use of x-ray equipment for therapeutic work at a premium of not less than \$150 for the minimum coverage.

The Zurich General Accident and Liability Insurance Company, Ltd., according to the committee's information, will issue physicians' indemnity policies in certain instances. But the committee is also informed that the Zurich will not issue a policy to a physician who is not a member of his county society and the State Association, and even though a physician is a member of his state and county societies the company exercises a rigid selection. This company is not at all anxious to enter the malpractice field on a large scale.

There may be other insurance companies authorized to do business in California which will write malpractice policies, but your committee is not aware of their identity.

The large number of surplus line brokers representing various groups of underwriters located at Lloyd's in London, England, who are engaging in the malpractice insurance business in this state, are not so well known to the medical profession nor are their policies, or, in fact, the very nature of Lloyd's insurance.

Lloyd's is divided into many groups of underwriters, each operating independently of the other. In California these groups are represented by approximately thirty-seven agencies known as "surplus line brokers." Insurance agents in the various towns and cities of the State place the insurance of their clients (i. e., physicians) with the surplus line broker. In insurance terminology the insurance agent is known as the "producer," and the surplus line broker is often referred to as the "broker," "underwriter," or "agent." (Mr. Hartley F. Peart, attorney for the California Medical Association, advises that this language utterly disregards the legal distinction between an "agent" and a "broker.")

The various Lloyd's groups (often referred to as "underwriters"), each acting for itself, prepare so-called underlying contracts by the terms of which the particular group authorizes specified agents (surplus line brokers) in various parts of the world to issue contracts of insurance to individuals in the name of "Lloyd's of London." Each member of the underwriting group signs his name to this underlying contract and indicates after his name the proportion of the total liability which may be incurred on all of the insurance contracts ultimately issued which he agrees to be personally responsible for. Copies of this underlying contract are then made available to the agents of the particular underwriting group all over the world. Acting pursuant to the authority contained in an underlying contract, surplus line brokers in California issue and sign malpractice insurance contracts bearing the name "Lloyd's of London."

The question of placing malpractice insurance with surplus line brokers representing underwriting groups at Lloyd's in London, England, is a serious and immensely complicated problem. In addition to the problems created by the very nature of Lloyd's there are the legal problems which exist as a consequence of Lloyd's being situated several thousand miles away from the State of California.

Finally, one San Francisco broker submitted a policy form to the committee for its approval or disapproval. This form was submitted to Mr. Peart with the request that he review it. On his recommendation, your committee expressed its approval of this particular policy.

Your committee is informed that within the past two months a number of surplus line brokers issuing Lloyd's of London policies have revised their policy forms to conform with the policy form prepared under the direction of Mr. Peart and approved by your committee. At the present time it is believed that most policy forms now being issued in this State are, in substance, identical with the form which your committee has approved, but it has been impossible to verify this in all instances. Therefore, and in order that no misunderstanding may arise, your committee recommends that an expression of approval or disapproval be withheld with respect to malpractice insurance policies issued in the name of Lloyd's of London for the time being so that your committee and Mr. Peart may have an opportunity fully to verify the information concerning uniformity of policy forms.

The growth of malpractice claims has become a serious problem, and one which the medical profession must face and solve. Just why the problem has grown more acute in recent years cannot be said with certainty; but we can indicate, as the result of our investigations, the course that must be pursued if the growing evil is to be checked.

Some investigators have pointed out the increase has kept pace with the therapeutic use of radium and the roentgen ray. The development of surgery has received a share of the blame. Well founded or not, there is food for thought in the fact many insurance companies operating in this field charge higher premiums for policies written for surgeons, roentgenologists, and radiologists than for policies written for general practitioners.

Your committee strongly recommends that consideration be given to the study of the causes of malpractice claims as outlined by the Medical Defense Committee of the Los Angeles Medical Society. They are:

1. Ill-timed and critical remarks, innuendoes, and inferences by other doctors.
2. Emotional resentment on the part of patients, parents, and friends accompanying tragedy, injury, and accident, which is concentrated upon the doctor, often without reason.
3. Ill-timed and poorly conceived advice from legal, interested parties.

4. Inadequate, inaccurate, unscientific clinical and hospital records.

5. Submission by attorneys of description of the treatment rendered, to another member of the medical profession, who will examine it critically and point out one or two phases wherein he (the critic) would have done differently. The plaintiff's lawyer then immediately seizes upon this information and alleges that in those items the defendant was negligent.

6. Lack of information on the part of the public as to what actually constitutes malpractice.

It is further recommended that there be appointed in every county medical society a medical defense committee whose duties shall be, whenever a malpractice claim is made or threatened, to investigate the case and advise as to its handling in cooperation with all those concerned. In this connection your committee submits the following recommendations:

1. It shall be the policy of this committee and of the component county society to respect the privilege of every member to testify in any case as his conscience and opinion may dictate, and the committees shall not seek to prevent any member from so doing. It shall in all manner act with due regard to the rights of the patient.

2. Whenever this committee is informed that a claim of malpractice is made or threatened, the chairman or secretary shall, as soon as possible, summon a meeting of the committee for the purpose of investigating the circumstances connected with the case.

3. It shall be the duty of every member of the component county society to notify the chairman or secretary of this committee of any malpractice claim made or threatened against him, or against any other member of the profession, and to appear before this committee at any time when he may be called and give the committee all the information he may possess regarding the case.

4. It shall be the duty of every member of this Association who contemplates participation in the preparation of a malpractice claim or suit or testifying in any such suit, to first notify the Medical Defense Committee of his intentions and give his reasons therefor.

5. No member of this Association shall make a charge for services or accept any compensation for acting with regard to a malpractice claim. It is the policy of this Association that no member shall speak disparagingly of the treatment given by any other member until he has made himself thoroughly familiar with all the circumstances as they existed at the time the treatment was rendered.

Your committee wishes to emphasize the fact that the difficulty in getting an acceptable policy in California, due to mushroom growth of malpractice suits, will never be eliminated as long as the present laws remain on the statute books. The committee is informed that a plaintiff need only allege negligence or carelessness in order to obtain a court hearing, and that courts have frequently been prevented from granting a nonsuit by reason of such allegations.

The Council recommends a review of the statutes and decisions of other states in an effort to ascertain whether or not procedural legislation might not be suggested which would afford better protection to licensed persons.

Your committee further recommends that every member of the California Medical Association should be a member of the Medical Society of the State of California; although a member's liability insurance policy provides the member with the services of the carrier's attorney, that attorney, under the ethics and principles of his profession, must represent the insurance carrier first. Hence, the defense service of the member is directed to the fulfillment of his client's conception of its contract with him, and it is the company's interest which he must at all times protect.

The Medical Society of the State of California makes it possible for its members to secure the personalized supervision of and participation in all legal problems and trial conduct of their own personal attorney, thus assuring full protection of each member's personal and professional interest. The Society indemnifies the member for the expense of his attorney. The member's attorney, by means of cooperation with the insurance company's attorney, is able to provide the member with complete legal protection.

Respectfully submitted,

George G. Reinle, *Chairman.*

COMMITTEE ON MEDICAL ECONOMICS

Executive Group

John H. Graves, Chairman, 1938
Edward M. Palette, 1940 William R. Molony, Sr., 1939

To the President and the House of Delegates:

The committee has held no meetings during the past year.

Meetings of the Committee on Public Relations have been attended by some members of the Medical-Economics Committee, and correspondence has been exchanged among the members.

In view of the development of numerous activities in the field of medical economics, it appears likely that the coming year will present more problems that will come within the scope of the committee than demanded attention during the past twelve months.

Respectfully submitted,

John H. Graves, *Chairman.*

COMMITTEE ON MEDICAL EDUCATION AND MEDICAL INSTITUTIONS

Executive Group

Loren R. Chandler, Chairman, 1939
John B. Doyle, 1940 B. O. Raulston, 1938

To the President and the House of Delegates:

Your Committee on Medical Education and Medical Institutions has considered matters referred to it by the Association concerning the activities at one of the State institutions, making recommendations to our Council.

This committee has cooperated with the Committee on Postgraduate Education and with the four medical schools in California in postgraduate medical education. Inasmuch as the activities of the medical schools in California are described adequately from time to time in bulletins and reports, your committee sees no need to present at this time another report on their activities.

Respectfully submitted,

L. R. Chandler, *Chairman.*

COMMITTEE ON MEMBERSHIP AND ORGANIZATION

Executive Group

E. Vincent Askey, Chairman, 1938
G. Dan Delprat, 1940 Dewey R. Powell, 1939
The Secretary, ex officio

To the President and the House of Delegates:

Your Committee on Membership and Organization has held no special meetings. The attention of your committee has been given to encouraging and noting the various efforts of your county societies in the constant procedure of recruiting members.

Since the recruiting of members must be in the hands of the county societies primarily, we would suggest that your body encourage each county society to make a survey such as was recently made by one large county unit. This survey showed the following statistics:

Total number of nonmembers in county.....	1,923
Number of former members who have been dropped for nonpayment of dues.....	313
Number of nonmembers who may be eligible but are over 55 years of age.....	598
Number of nonmembers who are eligible and are under 55 years of age.....	798
Number of nonmembers with evidence indicating that they are not eligible.....	137
Number of nonmembers who have applied but have been rejected.....	55
Number of nonmembers who are not listed in any directory.....	22

With this knowledge it is possible to put on an active campaign to induce those eligible and desirable to join without loss of effort and with the greatest efficiency.

We need not again emphasize the importance of the strongest alliance among all doctors of medicine. A membership as large as possible is the first step toward welding our profession into an efficient militant organization, defending scientific medicine and our professional rights.

Respectfully submitted,

E. Vincent Askey, *Chairman.*

COMMITTEE ON POSTGRADUATE ACTIVITIES**Executive Group**

John C. Ruddock, Chairman, 1940
 F. E. Clough, 1938 F. F. Gundrum, 1939
 The Secretary, ex officio

To the President and the House of Delegates:

The Committee on Postgraduate Activities has had several meetings during the past year as well as various correspondence concerning its activities.

The committee this year has carried on the work that had been started in previous years by former committees. The Council of the California Medical Association has recognized the obligation of the California Medical Association to afford opportunity to its members to engage in continuous educational studies with a minimum of inconvenience, time and expense. It has promptly carried out the recommendations of the committee in causing to be published, as a supplement to the CALIFORNIA AND WESTERN MEDICINE in the November, 1937 issue, a five-year study program for graduates in medicine. There has been listed in this supplement 103 subjects for postgraduate programs. The committee realizes that this supplement is incomplete, and at the present time is revising it as experience shows the need for changes and where subjects have had need to be added and supplemented. The committee feels that the precedent that has been established by the publication of a five-year study program for graduates in medicine is very worth while and answers one of the problems and justifies the existence of organized medicine. The subjects as listed in the supplement are not intended for didactic work in medicine. They are not intended to provide physicians for any specialty, but they are intended to afford an opportunity to the members of the California Medical Association to remain abreast of scientific progress and to apply it in their daily practice with an understanding of the underlying problems and fundamentals.

The committee realized that there are certain members of the California Medical Association who will not embrace the opportunities that are offered them. However, the opportunities will be available and if they are not taken advantage of, then those men will lose who do not embrace them. The committee intends to further report in detail concerning certain problems of its plans for work to the House of Delegates.

Respectfully submitted,

John C. Ruddock, *Chairman*.

COMMITTEE ON PUBLICATIONS**Executive Group**

Ralph Eusden, Chairman, 1940
 Ruggles A. Cushman, 1938 Oscar Reiss, 1939
 The Editor, ex officio The Secretary, ex officio

To the President and the House of Delegates:

The detailed report of the editor may be considered part and parcel of this committee's report.

With the physical arrangement of the contents of the official journal, and its editorial policy and comment and projected plans, the committee is in full accord.

In these days of economic and political unrest, the medical profession is increasingly faced with problems peculiar to its functions, not only with its organization and stability, but to the public.

Therefore, editorial comment and publication of articles pertinent to the Association's place in the political and professional sun will be increasingly forthcoming, to the end that our membership may be well and honestly advised, and our rights and position maintained.

Our official journal has reached an outstanding position in the field of the state and regional medical journals, and its efforts to bind together the membership in a well-advised manner, as well as to give members scientific information of an up-to-date and useful nature, shall continue to be a major purpose.

Complaints have been scarce. Papers submitted are fairly considered, and the editorial policy of giving preference to annual session papers and clinical presentations has our continued approval.

This being an election year the committee urges that you read the official journal in order better to acquaint yourselves with legislative matters of importance to the medical profession.

The committee requests for CALIFORNIA AND WESTERN MEDICINE, as the official journal of the Association, the whole-hearted support of the Council and House of Delegates in its present and projected character and policy.

Respectfully submitted,

Ralph Eusden, *Chairman*.

COMMITTEE ON SCIENTIFIC WORK**Executive Group**

Frederick C. Warnshuis, Chairman, ex officio
 Lemuel P. Adams, 1940 F. M. Pottenger, 1939
 J. Homer Woolsey, 1938 Howard F. West, ex officio
 Nelson J. Howard, ex officio

To the President and the House of Delegates:

The scientific program for this sixty-seventh annual session represents the major activity of this committee.

Your committee renews its recommendations that the House of Delegates give careful consideration to the desirability and advisability of selecting places for the holding of annual sessions that provide adequate accommodations for section meetings and scientific exhibits.

Respectfully submitted,

F. C. Warnshuis, *Chairman*.

COMMITTEE ON PUBLIC RELATIONS

The Committee on Public Relations consists of the chairman of the following standing committees and of certain general officers of the Association, all serving ex officio. The chairman of the committee is Charles A. Dukes. The secretary-director is Frederick C. Warnshuis. The chairman of the Committee on Public Relations is, ex officio, a member of the Council. The Committee on Public Relations includes the following:

Fred B. Clarke, Chairman, Committee on Health and Public Instruction.
 Daniel Crosby, Chairman, Committee on Hospitals, Dispensaries, and Clinics.
 Morton R. Gibbons, Chairman, Committee on Industrial Practice.
 E. Vincent Askey, Chairman, Committee on Membership and Organization.
 John H. Graves, Chairman, Committee on Medical Economics.
 Junius B. Harris, Chairman, Committee on Public Policy and Legislation.
 Charles A. Dukes, Chairman, Cancer Commission.
 John C. Ruddock, Chairman, Committee on Postgraduate Activities.
 Howard Morrow, President of California Medical Association.
 William W. Roblee, President-elect.
 Frederick C. Warnshuis, Secretary-Treasurer.

To the President and the House of Delegates:

From month to month in the Department of Public Relations in the Association's official journal, the Committee on Public Relations has rendered progress reports on its activities. This report will, therefore, be limited to a few comments and recommendations.

I.

Our professional relations to the public in general, and particularly to governmental agencies concerned with public interest, is most unstable and far from satisfactory. Changes and new proposals related to medicine and medical care occur overnight. Proposals are devised, altered, abandoned, and new plans are projected. There is a palpable instability and unrest. This attitude renders it impossible to submit a clear statement as to what has occurred or to predict what the tomorrows may bring.

Your committee feels that an ultimate and acceptable solution of this problem is dependent upon two fundamental principles that merit concentrated action. They are:

(a) The necessity of creating and maintaining public good will and confidence for the individual doctor of medicine and the units of our medical federacy.

(b) To cause the public and its governing agencies to recognize that our profession and its organizational units, by reason of their training, past achievements, experience, intimate contacts, and capability, are more competent to devise ways and means to satisfactorily meet the medical needs of all classes of people than any other agency, govern-

mental branches, or self-constituted groups or individuals who are outside the pale of medicine.

Your committee has sought to develop these two principles through several ways and by acquired contacts. Your committee alone is quite impotent to attain this public confidence. Attainment can only be accomplished through the persistent energetic efforts of every member who is called upon in his daily activities to embrace every opportunity to create public good will and confidence in the profession and its organizational representatives and spokesmen.

Your committee stresses the need of this solidarity and coöperation and urges that county societies concern themselves with these questions. Individualism, independent minority groups, and their quests, delay and confuse, thereby retarding early ultimate satisfactory establishment of acceptable relationship between the public and the profession.

II.

Coöperation with Public Agencies.—Maintenance of contacts and coöperation with lay and governmental agencies have been continued during the year.

The director has been elected to an office in the American Legion. He was also elected as a director of the California Safety Council and is serving on two important committees of that organization. Through the California Forestry Medical Service Corps he has maintained official contact and service with the Federal and State Forestry Services, and the State Highway Traffic Department.

Contacts have been maintained and coöperation continued with the following agencies: Department of Education; Board of Medical Examiners; Department of Health; Attorney-General; Insurance Commissioner; Compensation Board; Hospital Association; Nurses' Association; Federation of Women's Clubs; Business Women's Clubs; Young Women's Christian Association; WPA; and public Libraries.

In all of these contacts, a persistent, sustained effort is made to impart dependable information, foster good will, subscribe assistance, and develop mutual interests. Our files contain many expressions that warrant the time and work contributed to these contacts.

III.

Public Education.—The committee is appreciative of the assistance rendered by the Committee on Health and Public Instruction and some eighteen members for their time contributed in giving lectures to Y. W. C. A. and high schools and certain women's clubs. Although uninformed as to the details, the committee notes with commendation the public education program of the Los Angeles County Medical Association and its Speakers' Bureau.

The committee endorses and urges that county societies conform to the recommendations of the Committee on Health and Public Instruction.

An informed public, possessed of dependable information, will be of tremendous value in establishing sound policies.

IV.

Insurance and Hospital Service Plans.—Following investigations, conferences, and reviews, this committee has recommended that the Council endorse the following organizations issuing hospital insurance policies: Insurance Association of Approved Hospitals, Oakland, and San Francisco; Association of Southern California Hospitals; and the Intercoast Hospitalization Insurance Association. The committee will review and prepare recommendations for any other contemplated hospital insurance plans.

Health Service Plans.—The committee is advised, but is without factual details, that the American Medical Association Bureau of Economics is drafting certain recommendations for guidance when the formation of Medical Health Service is contemplated. Until these recommendations are available, it is recommended and urged that formation or affiliation with any and all health service groups or organizations be held in abeyance.

V.

Miscellaneous.—The year's activities include the following services:

(a) Information Bureau. Many hundreds of inquiries from the public and the profession are answered.

- (b) Press releases to local newspapers.
- (c) Distribution of approved literature to lay organizations and individuals.
- (d) Maintenance of a reference library.
- (e) Pacific Tri-State Conference.
- (f) Golden Gate International Exposition.

IN CONCLUSION

The committee, composed as it is of chairmen of standing committees and officers, has served as an interlocking administrative unit for these Association committees. In this dual capacity it has, we believe, coördinated functions and accomplished worth while results that are beneficial to every member. In consequence, we are of the opinion that specific guiding recommendations should emanate from individual committees, and when approved by the House of Delegates, or the Council, such recommendations will be observed by this committee.

Respectfully submitted,

C. A. Dukes, *Chairman.*

V

REPORTS OF SPECIAL AND COUNCIL COMMITTEES

COMMITTEE ON ANIMAL EXPERIMENTATION

Executive Group

Philip K. Gilman, *Chairman* Charles A. Dukes
Loren R. Chandler

To the President and the House of Delegates:

Your Committee on Animal Experimentation met and the chairman was authorized to act as the committee's representative on the Executive Committee of the California Society for the Promotion of Medical Research.

It is possible some of you may not be familiar with the history, organization, and objects of this society. The following will make clear these points and emphasize the extreme importance of the organization.

In militant opposition to the so-called "State Humane Pound Law," which will come before the voters by Initiative petition at the General Election next November, the medical fraternity of California and their lay friends are enlisting under the banner of the California Society for the Promotion of Medical Research. This society will conduct the campaign against the latest attempt of the antivivisectionists to throttle scientific research into the causes and cures of disease in California.

For the first time since their defeat in 1922, the self-styled "humane" groups have come before the people with another of their time-worn attacks upon medical research. With plenty of funds apparently at their disposal, proponents of the "State Humane Pound Law" are busily disclaiming that this is an antivivisection measure. Yet high legal authority has declared the proposed law to be, in effect, antivivisection only thinly disguised, since it would cut off the source of supply of animals for experimental purposes.

The California Society for the Promotion of Medical Research was organized in 1915 by medical, educational, and business leaders throughout the State. It led the successful campaigns of 1920, 1922, and previous years against the antivivisectionists, and is today being strengthened for the campaign this fall by increasing its membership among all classes of our citizens.

Dr. Ray Lyman Wilbur, President of Stanford University, is president of the Society. The vice-president is Mr. Frederick J. Koster, Chairman of the San Francisco Chapter of the American Red Cross and former president of the California State Chamber of Commerce. The secretary is Dr. Salvatore P. Lucia of the University of California Medical School, and the treasurer is Mr. J. K. Moffitt.

The Finance Committee for Northern California comprises: President Ray Lyman Wilbur; Dr. Robert Gordon Sproul, President of the University of California; Right Reverend Charles A. Ramm, Rabbi Irving F. Reichert, and William Kirk Guthrie, D.D.

The Campaign Committee for Northern California is headed by Philip K. Gilman, M.D., as chairman. The other

members are: Eldridge J. Best, M.D., Delegate to the American Medical Association; Ernest Sloman, D.D.S., Superintendent of the College of Physicians and Surgeons; Mr. James Leo Halley, President of the West Coast Laboratories, Ltd., and Joe G. Sweet, attorney at law.

The committee for Southern California has for its chairman, Dr. Robert A. Millikan, President of the California Institute of Technology. Serving with Dr. Millikan on the Finance Committee are: Dr. Rufus B. von KleinSmid, President of the University of Southern California; Remsen du Bois Bird, President of Occidental College; Charles K. Edmunds, President of Pomona College; Rabbi Edgar F. Magnin, Robert Freeman, D.D., and Louis B. Mayer.

The California Campaign Committee is under the chairmanship of Dr. B. O. Raulston, member of the Committee on Medical Education and Medical Institutions of the California Medical Association. Included among those serving with Doctor Raulston on the committee are: Donald J. Frick, M.D., Percy T. Magan, M.D., John R. McCoy, D.D.S., Bennett Allen, Professor of Zoology of the University of California at Los Angeles; John W. Henderson, General Manager of the California Supply Company; and Robert Jennings, attorney at law.

The campaign against the enactment of the vicious "Humane Pound" legislation will see a preponderance of lay men and women lined up in active opposition to this antivivisection measure. In the opinion of the Society this is everyone's fight—not simply a defense of medical progress by medicine itself. Every effort is being made to attract to the membership rolls as many nonprofessional citizens as possible. Yet stress is being laid upon the fact that physicians and surgeons, dentists, veterinarians, registered nurses, and professional educator throughout California must be alert and actively coöperative if the campaign to defeat the Initiative is to be successful.

Endorsements of the California Society for the Promotion of Medical Research, and of its campaign against the "State Humane Pound Law," are being received daily from scientific and educational organizations in all sections of the country. Among others are the American Medical Association, California Medical Association, Public Health League of California, American Association for the Advancement of Science (250,000 members in affiliated groups), Society of American Bacteriologists, American Genetic Association, Western Society of Naturalists, and Northern California Retail Druggists' Association.

Of more than ordinary importance is this year's campaign of the Society to protect medical research against the onslaughts of sentimentalists. California, with its great university research laboratories, leaders in scientific discoveries tending to ameliorate the ravages of disease, is being made the testing ground for the nation by the antivivisectionists, as they, themselves, admit.

And—to quote *Hygeia*, monthly publication of the American Medical Association,

Let the antivivisectionists win but one victory in their campaign, which has persisted since 1875, and no one can tell where their insidious drive will end!

President Wilbur has urged that all who have received communications from the Society join at once so that the effectiveness of its work may not be delayed.

Headquarters are at 369 Pine Street, Suite 325, San Francisco (Sutter 8118), and 352 Chamber of Commerce Building, Los Angeles (Prospect 1338).

Your committee, therefore, recommends and moves that the House of Delegates authorize and instruct each county society composing the California Medical Association to appoint a special committee whose duty it shall be to enlist the support and arouse the interest of all voters in their community and by proper education cause them to aid in defeating this Initiative. Such committees as organized shall communicate with the secretary of the California Medical Association and the chairman of your Committee on Animal Experimentation for mutual assistance and coördination of activities.*

Respectfully submitted,

P. K. Gilman, *Chairman*.

* EDITOR'S NOTE.—For a recent discussion of the value of animal experimentation, see CALIFORNIA AND WESTERN MEDICINE, April, 1938, on pages 257 and 258.

CANCER COMMISSION

Executive Group

Charles A. Dukes, Chairman

Otto Pfueger, Secretary

Orville Meland, Secretary for Southern Section

A. Herman Zeller

Gertrude Moore

Harold Brunn

Henry J. Ullmann

Clarence G. Toland

To the President and the House of Delegates:

The Cancer Commission has felt that its first obligation is to the practicing physicians in this State, its duty being to increase the knowledge of cancer in order that patients may receive the best care at the earliest opportunity. The activities during the past year have centered about this obligation.

The annual study meetings for pathologists and roentgenologists were held at the last State meeting in Del Monte and were well attended. Likewise, a midwinter meeting for pathology was held in San Francisco, with forty-five physicians attending, representing all sections of the State. It is gratifying to see the increasing number of general surgeons who attend these meetings, and it has constantly been necessary to have greater space for them. Plans are under way for the meetings to be held in Pasadena in May. We feel these meetings are one of the highlights of our annual State session. The Cancer Commission desires an active part in the postgraduate study program, and feels that cancer should be accorded a special section in this program.

Feeling that it would be worth while to acquaint the medical profession at large concerning the Cancer Commission and its activities, a scientific exhibit at the annual meeting of the American Medical Association in San Francisco is being planned under the direction of Doctor Ullmann.

The Commission is justly proud of its activity in the preparation of the reports on cancer which have been published, and we note with pleasure that this procedure, initiated by the Cancer Commission, is being followed by other organizations, such as the Canadian Medical Association. The compliments of national authorities on our effort have been of the highest. Knowing that the field of cancer is anything but static, we would recommend that these reports be revised and brought up to date at an early day. Your committee has other plans for the future, though perhaps still somewhat visionary. These pertain to a general acceptance of a centralization of activities with regard to the diagnosis and treatment of cancer. We should like to be instrumental in the formation of diagnostic and/or treatment clinics according to plans already worked out by the Commission, to be used in all hospitals throughout the State. Where smaller hospitals have not the facilities, patients could be referred for diagnosis to the group in a near-by larger hospital. We feel that such groups would derive great benefit themselves, be instrumental in spreading knowledge to other physicians, and would make available to patients the best possible service.

Organization of Cancer Committees and Clinics

The following paragraphs outline suggestions for the organization of cancer committees and clinics:

At the present time it appears feasible in California to organize two types of cancer groups:

1. A purely diagnostic group in small hospitals and communities where adequate radium and other equipment for the handling of all types of malignancies cannot be economically maintained. Patients should be referred for treatment to larger centers, where adequate equipment is available.

2. A diagnostic and/or treatment group in hospitals and communities where adequate apparatus and equipment already exist or can be obtained and economically operated.

The principles of organization and conduct of both groups are substantially the same, except for the requirements of equipment.

PRINCIPLES

1. *Purpose*.—The group should bring together knowledge, training, and skill from all the various fields of medicine bearing upon the diagnosis of cancer and its treatment, recognizing that the proper diagnosis and handling of cancer at the present time requires special knowledge, train-

ing, and experience in more fields than any one physician can ordinarily expect to acquire.

2. *Personnel*.—The minimum personnel must include a surgeon, pathologist, a radiologist, and an internist, all specially trained and experienced in cancer. If they are available, it is desirable to include specialists in still narrower fields, *e. g.*, gynecology, eye, ear, nose and throat, genitourinary organs, neurosurgery, chest surgery, etc. An internist or a young practicing physician who is not too busy to take histories and look after them would be advantageous in the group.

3. *Meetings*.—Regular stated meetings of the entire group should be held for the discussion of all cases referred to it, the frequency of meetings depending upon the volume of cases to be considered (usually not less often than once a week). *Diagnoses and recommendations for treatment should come from the group and not from individuals.* It should be understood that patients once seen for diagnosis will return to the group for regular follow-up examinations.

4. *Records*.—Accurate records of patients and of the discussions of the group about them must be made and kept. The keeping of such records must be the responsibility of some individual and this will doubtless require, for satisfactory operation of any group, a paid full-time or part-time secretary. Sufficient forms for records may be obtained from the American College of Surgeons' Cancer Committee.

5. *Radiotherapeutic Equipment*.—1. X-ray equipment—adequate for all diagnostic purposes, and apparatus for high voltage x-ray therapy. 2. Radium—a minimum of 100 millimeters, preferably as a salt, with the necessary applicators and filters.

If treatment is to be undertaken under the direction of the group, minimum equipment, such as laid down in the report of the Radiology Committee of the Cancer Commission in December, 1932, should be available. Needless to say, the surgery and radiotherapeutic departments should be under the direction of experienced workers. The indiscriminate use of x-ray and radium in the hands of anyone but experts will do more harm than good.

6. *Present Functions of Cancer Clinics*.—The Cancer Commission believes that there are at present desirable cancer committees as follows:

(a) Cancer committees in general charity hospitals (county hospitals, etc.). Whether or not the Cancer Committee should operate a separate service, assuming complete charge of diagnosis and treatment of the cancer patients in the hospital, will depend on the wishes of the staff. In general, probably the best plan at present is for the clinic to see all cancer patients in the hospital, advising line of treatment to be undertaken and referring patients back to the services from which they came for carrying out of the treatment. Such patients should be seen from time to time by the committee for check of results of treatment and follow-up.

(b) Cancer committees organized to serve a private hospital or the community in general.

The Cancer Commission believes that at the present time such cancer committees should offer a consultation service for physicians, should make no charge for consideration of patients, should accept no patients for examination and diagnosis who are not referred by physicians, and should refer patients back for treatment. If, then, the physician originally referring a patient desires to have treatment carried out by a member of the Cancer Committee, arrangements for this should be on the usual private patient consultation basis.

7. *County Medical Society Support*.—Organization of cancer clinics or groups should be carried out by, and with the cooperation of local county medical societies.

Reference is made to the recommendations of the American College of Surgeons' Committee on the Treatment of Malignant Diseases—"Organization of Service for the Diagnosis and Treatment of Cancer: Minimum Standard." This report may be obtained in pamphlet form, published in June, 1931, from the American College of Surgeons, Chicago. Reference is also made to the *Bulletin of the American College of Surgeons* for December, 1931.

Respectfully submitted,

Charles A. Dukes, *Chairman*.

COMMITTEE ON REPORT OF FACTUAL DATA OF CALIFORNIA MEDICAL-ECONOMIC SURVEY

Executive Group

Edward M. Pallette

George H. Kress

Howard Morrow

To the President and the House of Delegates:

The special committee appointed last year, and to whose members was delegated the task of bringing off the press the "Report on Factual Data" of the California Medical-Economic Survey, completed its task when, in November, 1937, it placed in the mails, for each member of the Association, a copy of the 221-page report, and transferred one thousand additional copies to the Association office for distribution and sale under Council direction.

Concerning views that may be held regarding the Report as printed, in relation to factual inadequacies, costs, and other phases, it may be in order to state that it was no easy task to try to analyze and make presentable the voluminous copy submitted by the Survey Director, who had been employed to supervise the collection and compilation of the statistical data used in the creation of the tables, charts, and graphs. The burden of this onerous work fell almost entirely upon the shoulders of one member of the committee, the Editor, who generously gave not only hours, but days, to this labor, so important for the California Medical Association, in order to bring it to a conclusion that would be satisfactory both to the Federal authorities (WPA) and to the Association.

Every table, graph, and chart that was included in the Survey Director's report was printed, the committee adding thereto some explanatory addenda and interpretations which it deemed necessary to a proper understanding of the factual data. To what extent the Report may continue to be a subject of discussion by certain interests we do not know, and that need concern us but little, because the Federal authorities at Washington have stated that, in their opinion, the project has been completed; and the California Medical Association having more than done its part, certainly has an equal right to feel the matter is closed, so far as it is concerned.

Your special committee desires to add its personal comment that it hopes that members of future Houses of Delegates will carefully consider enterprises of this nature before embarking the Association on a series of expenditures which, in the present case, resulted in an outlay of the massive sum of \$50,000 dollars of its reserve funds.

Respectfully submitted,

Edward M. Pallette, *Chairman*.

SPECIAL COMMITTEE ON A QUALIFYING CERTIFICATE (BASIC SCIENCE) LAW

Executive Group

George H. Kress, General Chairman

Morton R. Gibbons, Chairman (for Bay Region)

Edward M. Pallette, Chairman (for Southern California)

Junius B. Harris, Chairman (for remainder of State)

To the President and the House of Delegates:

As the report of the Special Committee on a Basic Science Law for California, we are submitting the somewhat detailed review of the subject, made to the Council of the California Medical Association at its meeting held on January 15, 1938.

The Council at the meeting referred to, accepted the report and instructed the Special Committee to continue its studies and make future recommendations. (See Minutes, item 24, on page 126, in CALIFORNIA AND WESTERN MEDICINE, February, 1938.) The Council, because of the many initiatives to be placed before the electorate this year, also voted that no effort should be made to submit a Basic Science initiative act on the ballot of the November, 1938, state election. There is almost a unanimity of thought on the need of a Basic Science law as a proved means that will both protect the citizenry from incompetent healing art practitioners and at the same time maintain, at least in part, healing-art educational standards. On the other hand, since California has multiple healing-art boards (two of the three, through initiative laws) a Basic Science act, to apply to the three existing boards, and possible future boards, almost necessarily must be brought into existence

through a law that would be enacted by initiative vote of the electorate.

Appended hereto is the committee's report, as submitted to the Council on January 15, 1938. The perusal thereof is commended to all members who wish to orient themselves on the subject.

Respectfully submitted,

George H. Kress, *General Chairman.*

COPY OF REPORT SUBMITTED TO THE COUNCIL

Los Angeles, January 15, 1938.

To the Council of the California Medical Association:

Your Special Committee on Basic Science Law for California submits herewith a progress report:

At the 1937 annual session at Del Monte, the Reference Committee on reports of standing and special committees reported as follows:

Report of the Special Committee on Qualifying Certificate Law.—Although your committee is in favor of the passage of the Qualifying Certificate (Basic Science) Law, it does not feel that the expenditure of the moneys necessary therefor is feasible at this time, and recommends that this matter be held over for another year.

The committee recommends adoption.

After an explanation [to the House of Delegates] of the necessity of a qualifying certificate law in this State, by Dr. George H. Kress of Los Angeles and Dr. Lowell S. Goin of Los Angeles, a vote was taken and the motion did not carry.

At the Council meeting held on October 3, 1937, following the October 2 joint meeting of State Association and county officers and committees, at which a Basic Science law was approved, with no opposing votes cast, the Council voted (item 8, page 337, November, 1937, CALIFORNIA AND WESTERN MEDICINE):

... that the Committee on Qualifying Certificate Law be instructed to proceed with the preparation of an initiative, in as nearly the final form as possible, and to submit it to the Council. Carried.

The Executive Committee of the California Medical Association, at its December meeting in 1937, upon motion of President-Elect Roblee gave the Special Committee on Basic Science specific instructions to submit to the Council at its January 15, 1938, meeting in Los Angeles, as complete a draft of a final Basic Science law as could be put into form.

Acting under these instructions the general chairman of the special committee proceeded to make, as rapidly as was possible, some formative drafts (copies being sent to the subchairmen, Doctors Gibbons, Harris and Pallette, General Counsel Peart, President Morrow, and President-Elect Roblee, for their information and suggestions.)

This progress report herewith submitted to the Council is made by the general chairman of the committee, and in it he presents his own and, in good part, the views of Subchairman Pallette, which give the conclusions reached by them since their first Basic Science committee meeting of the Los Angeles County Medical Association, which was held in the year 1927.

Early in their studies, as then taken up, and in order to get the reaction of the profession and the public, they submitted to the California Legislature of the year 1929, Assembly Bill No. 666, a printed copy of which is attached to this report as *Exhibit "A."*

In the years that followed, through the newly instituted Council Special Committee on Basic Science Law, consisting of Dr. George H. Kress as general chairman, Dr. Morton Gibbons as subchairman for the Bay region area, Dr. Edward M. Pallette as subchairman for Southern California, and Dr. Junius B. Harris as subchairman of the remainder of the State, the medical profession of California was reminded that in a State such as our own, with multiple examining boards, and with not only an appallingly large number of cultist and would-be cultist healing-art practitioners (as well as succeeding legislatures, whose members seemed increasingly susceptible to the lures put out by cultist groups seeking legal recognition), it was a

grave question whether the medical profession of California should not actively make an effort to protect the standards of scientific medicine and the public health by sponsoring and striving to push to enactment a Basic Science law modeled after those which in other states of the Union had produced much to be desired results.

Accordingly, a number of tentative drafts of Basic Science laws, under the name "Qualifying Certificate Acts," were drafted and studied by the Special Committee and from time to time were referred to editorially and otherwise in the official journal of the Association.

In our last legislature, (1937), in order again to test out the reaction of healing-art groups and the public of California, a draft, known as Assembly Bill No. 1552, was introduced. A printed copy thereof is attached to this report as *Exhibit "B."*

A printed copy of the Iowa Basic Science Law (a state possessing, like California, multiple examining boards), which was enacted in 1936, is attached hereto and marked *Exhibit "C."*

Copies of a mimeographed modification of this recent Iowa law, drafted to permit adaptation to the needs of California, have been sent to each councilor, and a copy, marked *Exhibit "D,"* is attached hereto.

Likewise, a copy of the printed Basic Science law model, drafted by the Medico-Legal Bureau of the American Medical Association, marked *Exhibit "E,"* is submitted.

The undersigned general chairman also submits some American Medical Association analyses of all existing Basic Science laws; and copies of the full text of the same, should occasion arise for their consideration. These are attached as *Exhibit "H."*

The above reports and addenda on this important subject are presented for possible consideration in the decision which the Council should make today—on whether a draft of a Basic Science law should be placed on the State election ballot of November, 1938.

Before a Basic Science law is placed on a state election ballot it will be necessary for the Council to make decisions on the items which follow:

1. *Initiative Law.*—This Council agrees, we believe, that any Basic Science law, to be of real or permanent value to California, should be an initiative act enacted into law by vote of the electorate, and not a legislative enactment.

2. *Costs of Signatures of Voters to Initiative Petitions, etc.*—It should be realized that in order to secure the 185,395 valid signatures of voters, with correct precinct allocations, all in conformity with the State election laws, it will be necessary for our Association to spend between \$25,000 and \$30,000 as follows:

(a) The sum of approximately \$20,000 for the necessary signatures. A bid from a well-known California signature firm, marked *Exhibit "F,"* is attached to this report, the bid from this company being \$19,350. The matter of securing signatures by doctors through their secretaries, and the amount of moneys to be saved thereby, etc., is not here discussed. It can come up in oral discussion.

(b) The sum of \$6,000 for purchase of 570,000 postcards . . . (use explained verbally to Council), one hundred of such, with a brief request for support of the Basic Science bill printed thereon, to be sent to every member of the California Medical Association. Each member to be requested to send these one hundred postcards to one hundred of his patients or friends (who, naturally, as patients, are logical supporters of scientific medicine and a Basic Science law).

These 600,000 postcards should provide contacts with twice or thrice that number of voters, and on a proposed law, so evidently needed on its face, this should mean that these one to two million or more voters contacts would put this Basic Science law across to successful enactment by one of the largest majorities yet recorded for a successful initiative measure. Copy for such a postcard, marked *Exhibit "G,"* reading somewhat as follows, is attached:

(Suggested Postcard Request)

(Salutation)

Dear Friend:

On your election ballot you will find Initiative No. . . . (Basic Science Law). Its purpose would make it necessary for all doctors to have at least a high school education.

Certainly, that is not too much to ask of those in whose hands you and yours place your health and lives.

If you could vote "yes" for this law, and also speak in its favor to your friends, I would greatly appreciate your action.

* * *

Other measures on this year's ballot, on which I shall vote "no," because I think they are against the public health interests of California, include:

(Title) Initiative No.

(Title) Initiative No.

Cordially yours,

M.D.

(c) Incidental expenses should not exceed \$1,000 to cover postage, printed matter, etc., provided we refrain from foolishly expending funds by cheap, controversial argument over the radio networks.

3. *Shall a Basic Science Law Be Submitted in the State Election in the Current Year, 1938, or Shall It Be Postponed for the State Election of Two Years Hence, in 1940?* This thought is referred to at this point simply to remind the councilors thereon before taking up the question of whether the Initiative is to be submitted in 1938 or 1940; a decision which necessarily must depend upon whether we can draft an Initiative Basic Science law, such as we would be willing to place on this year's State election ballot. This subject is further considered in Item 4, which follows.

4. *What Would Be a Satisfactory Draft of an Initiative Basic Science Law?* Facts of fundamental importance in an "Initiative law," to be presented to the California electorate, imply that the proposed law shall be written in soundest legal form, preferably in language which has been found acceptable to the higher courts in previous decisions; that it shall not be overlengthy; that its provisions, while being specific for the ends desired, shall not be of a nature to become frozen sections with the passing years, where amendments to an initiative law may prove just as expensive of enactment as was the original act; and that the proposed law itself shall have sufficient merit in attainable end-results to warrant the expenditure of a sum necessarily approaching so large an amount of the Association's funds as almost \$30,000.

For the above reasons the mimeographed Qualifying Certificate law, which was submitted to the last legislature as a form of gesture, was deemed unsatisfactory as a working model, and the Iowa Act of 1936, in which the experience with prior Basic Science laws was utilized, was taken as a good type to modify.

Such a form was drafted, sent to each councilor as Form "B" with request for perusal and study, and a copy, with a long list of queries on legal points, was sent by the Special Committee chairman to General Counsel Peart, with request that Mr. Peart analyze the draft and make report thereon at this January 15 meeting of the Council.

Concerning the modification or draft submitted today (Form "B"), attention is called to the following points:

The committee has gone back, therein, to the use of the term "Basic Science Law" because every other similar law in the United States is so named, and legal decisions are recorded under that title.

Concerning the number and sciences in which examinations would be given, the committee decided on five absolute subjects, instead of a choice of five out of ten, lest legal complications should arise in giving such a choice (since every candidate would not have taken his examination on exactly the same subjects).

The five subjects chosen are those which are in practically every Basic Science law. Certainly no objection can be made to the three subjects of anatomy, physiology, and chemistry, as Basic Sciences. Bacteriology and hygiene seem to be the two other subjects that might be acceptable to all groups of healing-art practitioners. (Whether these should be designated nonmedical bacteriology or elementary bacteriology, or nonmedical hygiene, or whether subjects like embryology, botany, zoology, biology, or even English would be preferable to bacteriology and hygiene, for one, or both, is a debatable question, which the Council may wish to consider.)

The examining board would consist of five members, namely, of faculty members not holding healing-art de-

grees, attached, one each, to the faculties of the University of California, Stanford University, University of Santa Clara, University of Southern California, and the California Institute of Technology.

A clause was inserted in the draft which provided that the heads of these five universities would suggest to the Governor the names of three to five faculty members, not as nominees for the Basic Board of Examiners, but simply for possible consideration by the Governor. Whether this is desirable in an initiative law, is a question. It may be better to make it mandatory for the Governor to appoint a faculty member from each of the five universities; with a provision, however, that if any one of these institutions passed out of existence in the days to come, he could select some other university or four-year college located in California which had accredited collegiate standing with the State University of California, from which to select a faculty member for the Basic Science Board.

The proposed law would not be made to apply to any healing-art practitioners licensed in California at the time of its enactment, nor to healing-art students who had matriculated prior, say to January 1, 1939, nor to certain other professional and semiprofessional groups. Nor to Christian Scientists, whose publication committee has submitted for inclusion the exemption phraseology of the United States Service exemption clause.

To prevent an Initiative Basic Science law from becoming "frozen" in the years to come, it might be desirable to insert a clause permitting the passing of certain types of amendments, through legislative enactment of appropriate acts, submitted as amendments to the Medical Practice Act of California, or the Professional and Vocational Standards Act, or some pertinent public health act.

Each of the other sections of the proposed law could be commented upon, but since General Counsel Peart may present these to the Council, further discussion in this report may be waived.

In conclusion, it is proper to state that the general chairman of the Special Committee on a Basic Science Law makes this progress report in compliance with the implied instructions of the House of Delegates, and the direct instructions from the Council and Executive Committee to do so.

In common with many other members of the California Medical Association, he believes that a Basic Science law could render a beneficent service to public health and medical standards of our State. The provisions and language of the law, and the form in which such an Act would be submitted to the California electorate, is a decision that must be made by the constituted authorities of the Association, namely, its House of Delegates and Council.*

Respectfully submitted,

George H. Kress, General Chairman.

* A list of reports on qualifying certificate laws, printed in CALIFORNIA AND WESTERN MEDICINE, includes the following:

Vol. 32, No. 4, April, 1930, page 288. One hundred and eighty-sixth meeting of the Council of the California Medical Association. Item 30, Medical Practice Act and Basic Science Act.

Vol. 32, No. 6, June, 1930, page 430. Report of Special Committee on Revision of Medical Practice Act and of a possible Basic Science Act.

Vol. 34, No. 6, June, 1931, page 448. Report of Special Committee on California Medical Practice Act and on a proposed qualifying certificate (so-called basic science) law.

Vol. 35, No. 3, September, 1931, page 228. Editorial.

Vol. 35, No. 3, September, 1931, page 239. Miscellany.

Vol. 36, No. 2, February, 1932, page 128. Report of Special Committee on Medical Practice Act and on Qualifying Certificate Law.

Vol. 36, No. 6, June, 1932, page 439. Report of Special Committee on California Medical Practice Act and on a qualifying certificate (so-called basic science) law.

Vol. 41, No. 5, November, 1934, page 339.

Vol. 42, No. 1, January, 1935, pages 39 and 53.

Vol. 43, No. 4, October, 1935, page 304.

Vol. 43, No. 5, November, 1935, page 321. Editorial.

Vol. 43, No. 6, December, 1935, page 395. Editorial.

Vol. 44, No. 1, January, 1936, page 2. Editorial.

Vol. 44, No. 4, April, 1936, page 252. Editorial.

Vol. 44, No. 4, April, 1936, page 349. Special article.

Vol. 45, No. 3, September, 1936, page 218. Editorial.

Vol. 46, No. 1, January, 1937, page 4. Editorial.

Vol. 46, No. 4, April, 1937, page 53. Report.

COMMITTEE ON SYPHILIS

Executive Group

Howard Morrow, Chairman
Charles W. Barnett William H. Goeckerman

To the President and the House of Delegates:

The Venereal Disease Act was passed by the legislature in May, 1937, was signed by the Governor, and became a law on August 27, 1937. Under the provisions of the law, the Bureau of Venereal Diseases was created as a separate bureau within the California State Department of Public Health. The State program is administered by the State Department of Health, under the direction of Dr. Walter M. Dickie, Director of the Department. The Bureau was reestablished in February, 1937, and Dr. Malcolm H. Merrill was appointed as chief of the Bureau.

The system for reporting cases of venereal diseases has been simplified and modernized. The number of cases reported has increased by 50 per cent since these cards went into use, which shows a better coöperation of the physicians in reporting. Surveys have indicated that less than 10 per cent of the cases treated by private physicians have been reported. When the Bureau was established, thirty-five venereal clinics were reporting at monthly intervals to the State Department. The number has increased to seventy-seven. Another step has been to improve the general standard of medical care within the clinics. Almost all clinics have adopted the policies concerning admission laid down by the Bureau of Venereal Diseases, namely:

(a) Any patient for initial diagnosis and emergency treatment.

(b) Any case referred by a private physician for tests and consultation.

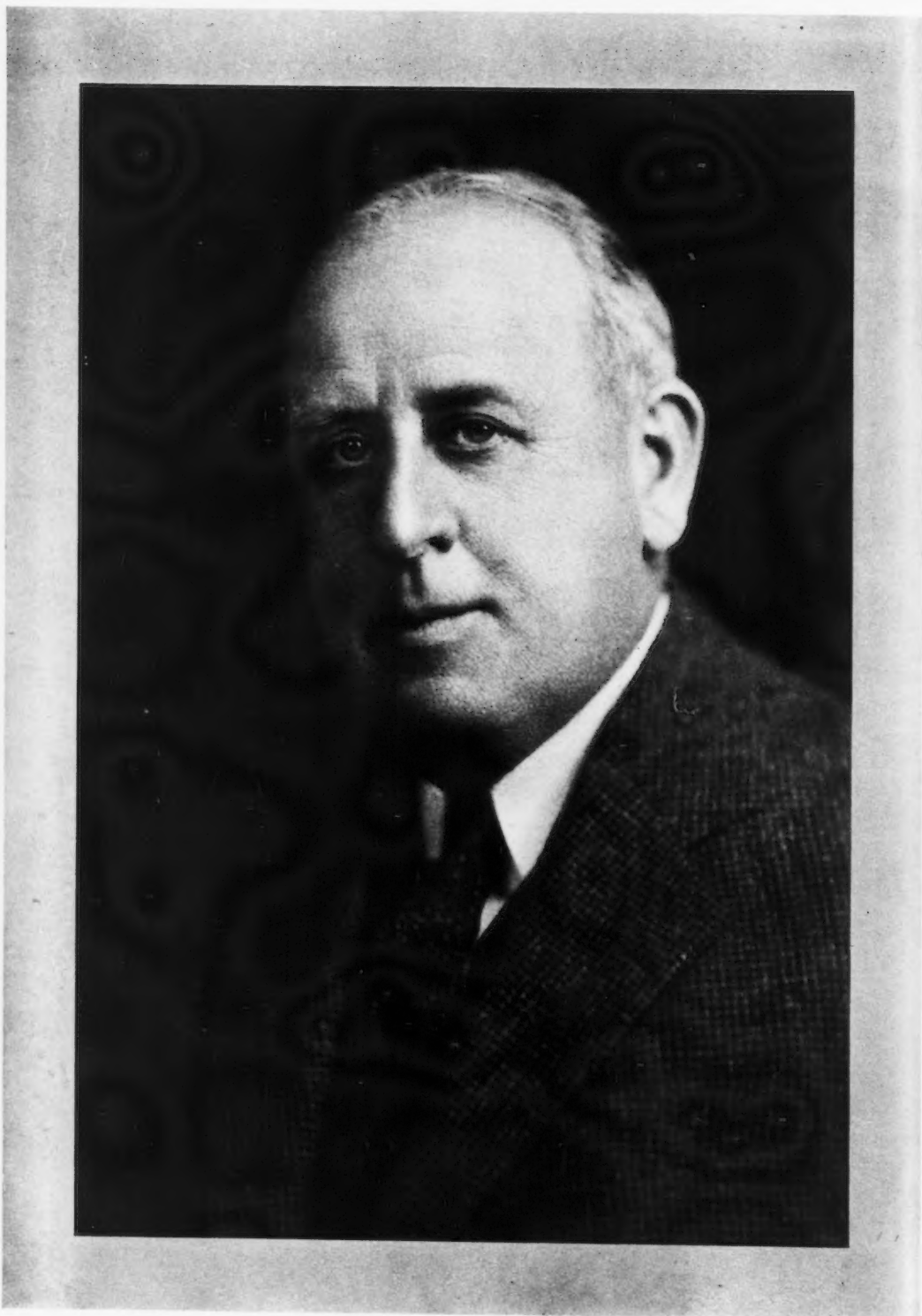
(c) Any patient unable to pay a private physician for treatment. Residency requirements have been abolished.

The Sacramento City Health Department Clinic was selected to determine the workability of various procedures of record keeping, treatment schedules, nursing procedures, etc. The same general plan is being inaugurated in the Fresno County Hospital Clinic, and will be extended as rapidly as possible to all clinics of the State that will coöperate with the State Department. The State Department of Public Health is assisting these clinics by providing equipment, clinic record forms, drugs, and personnel. A series of seven pamphlets have been issued. Two hundred thousand have been sent out from the State Department. Over one-half of these have been mailed directly to individuals as a result of requests.

The United States Public Health Service film, "Syphilis," has been shown to over fifty audiences. A series of seminars is being planned for county medical societies, to be carried on during the months of May and June. The services of Dr. Udo J. Wile, Professor of Dermatology and Syphilology of the University of Michigan Medical School, have been obtained for this purpose. This Committee on Venereal Diseases from the California Medical Association is coöperating in every way with the United States Public Health Service and the California State Department of Public Health.

Respectfully submitted,

Howard Morrow, *Chairman.*



HOWARD MORROW, M.D.
President, California Medical Association
1938